DOCUMENT RESUME

ED 281 701 RC 016 223

AUTHOR Siddall, Sandra S.; And Others
TITLE The Rural Clinical Option: An Implementation Handbook for Nursing Faculty.
INSTITUTION California State Univ., Chico. Rural Clinical Nurse Placement Center.
SPONS AGENCY Health Resources Administration (DHHS/PHS), Hyattsville, Md. Div. of Nursing.
PUB DATE Jul 86
GRANT DIO-NU-01579-04.
NOTE 101p.; Revised edition. For related document, see RC 016 224.
PUB TYPE Reports - Research/Technical (143)

EDRS PRICE MF01/PC05 Plus Postage.
DESCRIPTORS Administrator Guides; *Clinical Experience; Experiential Learning; *Field Experience Programs; Health Personnel; Higher Education; *Nursing Education; *Practicum Supervision; Program Descriptions; Program Development; Program Guides; *Rural Areas; Rural Education; Rural Environment
IDENTIFIERS California State University Chico; *Rural Clinical Nurse Placement Center CA

ABSTRACT

This how-to-do-it handbook is designed to help the potential rural clinical option (RCO) coordinator develop a program in which nursing students can have an in-depth clinical experience in a rural health facility. Separate sections detail how to: (1) determine the amount of release time and financial resources available to run the program; (2) determine the number of participants; (3) determine the service area throughout which participants may be placed; (4) identify the health-care facilities in which participants may be placed and the kind of nursing experiences available at these facilities; (5) identify preceptors who will supervise participants; (6) screen and place participants in the facility that will best meet their academic objectives; (7) locate housing for program participants; (8) maintain communication with participants, preceptors, members of the community, placement facility administrators, and nursing school administrators; (9) administer the program; (10) evaluate each participant; (11) evaluate each preceptor; (12) evaluate the program; and (13) be evaluated by nursing department and university administrators. Twenty-four sample letters, forms, and questionnaires related to these tasks are included as appendices. (NEC)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

ED281701

Rural Clinical Option

An Implementation Handbook for Nursing Faculty

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

☐ This document has been reproduced as received from the person or organization originating it.

☑ Minor changes have been made to improve reproduction quality.

• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY

Sandra Siddall

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

RC016223

BEST COPY AVAILABLE

THE RURAL CLINICAL OPTION

An Implementation Handbook
for Nursing Faculty

prepared by the Rural Clinical Nurse Placement Project,
California State University, Chico

Sandra S. Siddall, R.N., M.S., Director

Sylvia Novak, R.N., M.S.N., Assistant Director

Sharon Tanberg, R.N., B.S., Clinical Coordinator

edited by Tom Lang

March, 1979

This project was supported by Grant No. 5 DIO NU 01579-04
awarded by the Division of Nursing, Health Resources Administration

Revised January 1984 - Rural Clinical Nurse Placement Center
California State supported - Housed at California State University, Chico

2nd Revision July 1986

TABLE OF CONTENTS

	Page
HOW TO ESTABLISH YOUR PROGRAM	1
1. DETERMINING YOUR TIME INVOLVEMENT IN THE PROGRAM	1
2. DETERMINING THE NUMBER OF PARTICIPANTS	2
3. DETERMINING THE SERVICE AREA	2
4. IDENTIFYING PLACEMENT FACILITIES	3
5. IDENTIFYING PRECEPTORS	4
6. PLACING PARTICIPANTS	6
7. LOCATING HOUSING	6
8. MAINTAINING COMMUNICATIONS	
WITH PARTICIPANTS	7
WITH PRECEPTORS	9
WITH THE COMMUNITY	9
9. ADMINISTERING THE PROGRAM	10
10. EVALUATING PARTICIPANTS	10
11. EVALUATING PRECEPTORS	11
12. EVALUATING THE RURAL CLINICAL OPTION	11
13. EVALUATING THE COORDINATOR	12
A FINAL WORD	13
LIST OF APPENDICES	14

THE RURAL CLINICAL OPTION

An Implementation Handbook for Nursing Faculty

INTRODUCTION

The Rural Clinical Option (RCO) introduces nursing students to the professional and personal opportunities of rural areas. This allows them to better consider employment in communities that are traditionally understaffed by health-care professionals.

The program is offered by the nursing department of a college or university. Faculty determine the number of academic units earned on the program and assist participants in identifying learning objectives. The faculty coordinator places each participant in a rural clinical facility, where for 6 to 8 weeks, the participant works and is supervised by a health-care professional employed by the facility (a preceptor). The preceptor also helps acquaint the participant with the people and activities of the community. Housing for the participant is arranged by the coordinator, who also administers the program and evaluates each participant.

Nursing programs are being challenged by consumers, politicians, and educators to better serve the population. The number of RNs entering rural areas is far less than adequate. As a result, a large portion of our population is not receiving adequate health care. A Rural Clinical Option in your curriculum will help redirect nurses into these health manpower shortage areas.

This handbook was prepared for you, the potential RCO coordinator. It is a how-to-do-it handbook that will help you develop a program in which your nursing students can have an in-depth clinical experience in a rural health facility.

HOW TO ESTABLISH YOUR PROGRAM

To establish a successful RCO program, you, as the RCO coordinator, need to do the following.

1. Determine the amount of release time and financial resources available to run the program;
2. Determine the number of potential RCO participants;
3. Determine the service area throughout which participants may be placed;
4. Identify the health-care facilities in which participants may be placed, and the kind of nursing experiences available at these facilities;
5. Identify the preceptors who will supervise participants;
6. Screen and place participants in the facility that will best meet their academic objectives;
7. Locate housing in which participants may live while on the program;
8. Maintain communication with participants, preceptors, members of the community, placement facility administrators, and nursing school administrators;
9. Administer the program;
10. Evaluate each participant;
11. Evaluate each preceptor;
12. Evaluate the program; and
13. Be evaluated by nursing department and university administrators.

Sample letters, forms, and questionnaires related to these tasks are included as appendices.

1. DETERMINING YOUR TIME INVOLVEMENT IN THE PROGRAM

To place one to five participants, we estimate you will need about four working weeks of release time. Once the program is established, the

coordinator's job could conceivably be done on overload, though we recommend that it be a part-time position. Placing 6 to 15 participants requires about 8 weeks and is a part-time position. Placing 16 or more participants requires about 16 weeks and is definitely a full-time position. (The California State University system considers 18 hours of field work per week a full-time ---12 faculty units--- position.) Again, starting the program requires proportionately more time. Remember, too, that the distance and weather conditions between your campus and placement facilities can add greatly to your travel time and expenses.

2. DETERMINING THE NUMBER OF PARTICIPANTS

If your RCO will be an elective, you will have to ask the members of each nursing class how many wish to participate. (See sample brochure and fact sheets, Appendices 1 through 3.) (We found that an average of 10% of each class participated.) Asking students a year or two in advance may help you plan for changes in the number of participants from year to year.

If your RCO will be required, obviously, the number of participants will be the same as the class size.

The earlier you know how many participants you must place, the better.

3. DETERMINING THE SERVICE AREA

The service area should have a low population density. It may include communities of 50,000 people (semi-rural) or 10,000 people or less (rural) that are not adjacent to larger, urban centers. You can learn which areas lack adequate numbers of health-care professionals by contacting the regional Health Systems Agency. Again, you should consider transportation problems between your campus and the area, but remember that such problems are part of the rural experience and must be appreciated by the participants.

4. IDENTIFYING PLACEMENT FACILITIES

The clinical facilities in which participants will be placed should serve communities in the service area. Remote clinics serving smaller populations (Indian health projects, migrant camps, small lumber or mining towns) may also be acceptable.

Visit each potential placement facility and meet with the administrator. Explain the program and find out what kind of experience your participants could have if placed in the facility. Have the agency complete an Agency Information Sheet from which you can write an Agency Narrative (Appendix 4), for each facility. (We file these sheets by county and color code them by the type of facility; acute care, emergency room, etc. See Appendix 5.) During your interview, be sure to learn:

1. The nursing specialties available at the facility. (Possible specialties are listed in Appendix 6.) Can the facility offer participants the experiences they want? Will the facility allow student participation as well as observation?
2. The average patient census. Will the patient load provide adequate numbers of experiences?
3. The number of participants who could be placed in the facility at one time. What shifts would participants work? Does the facility close seasonally? How long could participants stay?
4. The willingness of the staff to work with participants.
5. The number of potential preceptors. One preceptor may supervise at most two participants.
6. The inclination of the facility to hire your graduates.

Some facility administrators may not wish to be part of the program. The usual, and understandable, reason is that the staff is already overtaxed and cannot afford the extra effort needed to supervise a participant. In

this case, thank them for their consideration and ask if you may call every few months to see if their situation has changed.

When administrators are willing to place participants, send them a Letter of Agreement (Appendix 7) that explains each party's responsibilities.

5. IDENTIFYING PRECEPTORS

A preceptor is a health-care professional, employed at the placement facility, who agrees to supervise a participant. (See Preceptor Fact Sheet, Appendix 8.) To the participant, the preceptor is a role model, a resource, a designer of instruction, and a supervisor. For these reasons, many faculty prefer to have only RNs as preceptors. We found that physicians, nurse practitioners, physician's assistants, public health nurses, and visiting home nurses (all appropriately screened) as well as RNs (diploma through masters) can function well as preceptors. Participants have little trouble separating these roles from that of nursing.

The preceptor need not prepare to be a role model: he or she already is one. The purpose of this role is to teach by example. As a resource, the preceptor should be able to provide information and demonstrate skills needed by the participant. As a designer of instruction, the preceptor should be able to help the participant plan and evaluate learning experiences. Finally, as a supervisor, the preceptor needs to encourage and allow the participant to take responsibility for his or her learning experience independent of the preceptor. The purpose of this role is to foster self-reliance, self-initiated inquiry, and self-evaluation on the part of the participant. (These roles are described in detail in A Role Guide and Resource Book for Clinical Preceptors, by John L. Simon, M.P.H., published by U.S. Department of Health, Education, and Welfare, Public Health Service, Health Resources Administration, Pub. No. HRA 77-14, September 1976. We highly recommend it. See also Guidelines for RCO Participants, Appendix 9.

The rewards of preceptoring are largely internal. While continuing education units might be arranged, tangible compensation for the extra time and effort is simply not available. (For this reason, it is important not to overtax a particular preceptor and to rotate the position among those qualified.) Most preceptors find their role personally satisfying. It is challenging to work with bright, energetic students and interesting to hear what is being taught in nursing schools. It tends to be a learning process for both preceptor and participant, and there is a certain status in being identified as a preceptor. These rewards are very real and should be included in your description of the position.

Have facility administrators and the nursing director help select possible preceptors. Nursing directors have consistently recommended good preceptors. Too, protocol requires that preceptors have the approval of their superiors. Occasionally, someone will volunteer directly to you. Any answer you give must be tentative until you have the approval of the administrators. When an administrator identifies a potential preceptor, we meet with the candidate and discuss the nature and responsibility of the role. Only after this meeting do we confirm the candidate as a preceptor.

It is important to consult with the nursing director about each placement. After discussing the participants' goals and objectives, the director can tell you which preceptors are available, and can help you match each participant to each preceptor. Your participants will have quite varied backgrounds, interests, abilities, and personalities. Your ability to match the preceptor (and to some extent, the facility) with a given participant will greatly affect the success of your program.

Preceptors and participants are required to work together as often as possible. Should the participant desire additional or different experiences, the preceptor may identify an appropriate interim supervisor. We send a

letter of confirmation (Appendix 10) to preceptors, and a letter of thanks (Appendix 11) at the end of the placement.

6. PLACING PARTICIPANTS

A slide presentation will help acquaint prospective participants with the program. (You can easily prepare such a presentation with a 35mm camera, an eye for photography, and a tape-recorded narrative of each slide.) Ours included 112 slides of rural towns, scenery, seminar sites, placement facilities, living arrangements, local events, recreational opportunities, and so on.) This presentation, a course description in the college catalogue, fact sheets, and other promotional material not only recruit participants but can give them an idea of what they would like to do in the program. Once they complete the application (Appendix 12), you should have a better idea of where they might be placed. We also strongly recommend talking with the participant and possible preceptor before making a final placement.

As part of the independent learning experience each participant formulates his or her own learning objectives for the program. These objectives will help you select a facility and preceptor, and will promote a meaningful learning experience.

Part of the placement procedure is completing a Letter of Agreement (Appendix 13) with the participant.

7. LOCATING HOUSING

Housing opportunities differ in each community. We found that renting a room and kitchen privileges with a family was the preferred arrangement. "House sitting" and trailers are also adequate. Rent (paid by the participant) ranges from free to $120.00 per month and depends on the family, gas and electric costs, and on the quality of housing. Some families "adopt" the participants and accept them into their homes, others have a more traditional,

landlord-tenant relationship.

Housing can be located by advertising through the placement facility, local service organizations, religious groups, the chamber of commerce, local newspapers, and Public Service Announcements (free) on radio and television broadcasts. (See Appendix 14.)

The participant's housing situation is a crucial part of the program. In addition to personal comfort, the interaction with residents and community activities is what makes the RCO experience unique.

It is often through the housing/living experience that the real essence of rural life is discovered. The participant housing questionnaire (Appendix 15) and the housing provider questionnaire (Appendix 16) should help you to select housing for them. You should verify the reliability of the landlord and inform your participant about the accommodations, rent, expenses, and responsibilities associated with accepting a particular housing arrangement. When all is in order, letters of confirmation (Appendix 17) should be sent to the landlord and participant.

8. MAINTAINING COMMUNICATION WITH PARTICIPANTS

Before participants leave for their placement, make sure you discuss:

1. The purpose of the RCO;
2. Their academic and personal responsibilities while on the program;
3. How they can contact you;
4. Their placement and housing situations (names, addresses, phone numbers, directions/maps, descriptions of what to expect;)
5. Personal needs (clothing, recreational equipment, car preparations);
6. The nature of the community, geography, and weather conditions in the area (the chamber of commerce should have this information);

7. The possibility of "culture shock;"

8. Any other information that might help them during their experience. (See Format for Participant Orientation Session and Participant Packet Checklist, Appendix 18.)

You may wish to hold periodic, on-site seminars with several participants. These can be informal gatherings in a scenic location or in one of the placement facilities. Participants can share their expectations and experiences and you can answer questions, help them examine their learning experiences, and generate insight. Guest speakers may also be invited. We have found that students are a great resource for each other. We encourage students to visit each other's placement site. Personal on-site visits with each participant and their preceptor also assures good communication.

You will be the "troubleshooter" if the occasion arises. The most common problems occur when:

- participants or preceptors do not communicate;
- the participant's role is not clear to the staff;
- the preceptor feels awkward about teaching; or
- the participant is not meeting his or her objectives.

Pleasant, informal visits with those concerned are the key to communicating about these problems.

A final "debriefing" seminar at the end of the experience provides participants the opportunity to review and summarize their experience and to suggest changes in the program. You will also become more familiar with particular preceptors and facilities. Academic requirements, such as tests, papers, logs, etc., can be dealt with at this time. This is also a good time for evaluations and for tying any loose ends.

We ask participants to keep a daily log (see Required Activities, Appendix 19) of their activities as part of their evaluation. The log

keeps you informed of the participants' activities and is useful to them in preparing assignments. We encourage them to include facts, activities, and feelings about the experience.

We also ask each participant to make a 10-minute presentation on some aspect of rural life. Topics have included Indian folk medicine, the history of lumbering, how and where to fly fish, and so on. The purpose is to broaden their exposure to rural lifestyles and activities. You may wish to publish a newsletter (Appendix 20) to be sent to each participant.

Each of the above activities can improve communication between you and the participants. We stress that this communication is essential to a successful program.

WITH PRECEPTOR

Make sure you discuss:

1. The purpose of the RCO;
2. What his or her responsibilities are to the participant;
3. What you expect of the participant;
4. What the preceptor should expect of the participant;
5. The dates of the placement;
6. The background of the participant;
7. How to contact the participant during the program;
8. How to contact you while serving as a preceptor. (See Preceptor Packet Checklist, Appendix 21.)

Be sure to visit with the preceptor as well as with the participant during on-site visits.

WITH THE COMMUNITY

Community awareness of your program can lead to housing arrangements.

Media advertisements or presentations to local groups should include:

- the purpose of the RCO;
- the importance of the program to rural communities;
- the importance and nature of local support (i.e., housing).

(See Appendix 15.)

9. ADMINISTERING THE PROGRAM

As coordinator, you need to keep records of expenses, participants, evaluations, and so on. Form letters are listed in Appendix 22.

One procedure we found helpful was to plot each placement facility on a large wall map. Color-coded pins show the locations of each kind of facility and penned lines mark the route and mileage from the campus to the facility. This provides essential information in a moment.

10. EVALUATING PARTICIPANTS

You must evaluate each participant's academic and professional performance during their placement. We interview each participant (Appendix 23) and preceptor and discuss the following.

As a student of the university, did the participant:

- meet course objectives?
- communicate effectively on assignments?
- learn the similarities and differences between rural and urban nursing?
- learn and stimulate learning in others?

As a member of a staff, did the participant:

- communicate effectively with co-workers?
- establish a rapport with co-workers?
- work well with co-workers?
- seek supervision when needed?

- comply with agency rules?
- adhere to work schedules?
- adhere to standards of personal hygiene?
- take and fulfill responsibility?
- identify problems and attempt to solve them?
- adapt to new situations?

As a member of a profession, did the participant:

- demonstrate compassion for patients?
- establish a rapport with patients?
- function well as a nurse?

Finally, as a member of a community, did the participant:

- become well-acquainted with the area?
- learn the similarities and differences between rural and urban life?
- adjust to life in the rural community?

We also have each preceptor evaluate the participant by completing the form shown in Appendix 24.

11. EVALUATING PRECEPTORS

You must decide if you wish to place participants with a particular preceptor again and if the preceptor is willing to supervise participants again. We interview each preceptor and participant and discuss the preceptor as member of a staff and as a member of a profession. (See Evaluating Participants, above.) The Guidelines for RCO Preceptors (Appendix 9) have also been useful as a format for evaluating preceptors.

12. EVALUATING THE RURAL CLINICAL OPTION

You should summarize your program's activities in an annual report. This report should contain a complete description of costs, activities,

problems, successes, and plans, as well as the reactions of participants, preceptors, placement facility administrators, faculty, and the coordinator. The purpose of the report is to inform nursing department and university administrators about the progress of the RCO. They will want to know if the program is meeting important community needs and academic objectives and if the time, personnel, and money are being well-used. Be sure to answer the following questions in your report.

- Does the program give participants an accurate picture of rural nursing? (Remember that your task is not to make rural nursing more attractive or to convince participants to work in a rural area. Your task is to create a situation in which participants can discover if they want to live and work in a rural area.)
- Is the program of value to nursing students?
- Is the program of value to rural communities?
- How much does it cost to place, supervise, and evaluate each participant?
- Can this cost be reduced?

13. EVALUATING THE COORDINATOR

As coordinator, you will probably be evaluated by nursing department or university administrators. Make available to them your annual report and any other information they request. They may wish to contact participants, preceptors, or placement facility administrators about your performance as coordinator. Your ability to organize, communicate, keep records, and solve problems will also be examined.

A FINAL WORD

We hope you will find this model useful in beginning your own Rural Clinical Option. The authors have tested and used these tools and methods with great success. The major components of this Rural Clinical Option remain: 1) the academic framework, 2) the placement facilities, 3) the one to one preceptor/student relationship, and 4) the community living arrangements.

Enjoy this exciting opportunity to provide your students with a sound, reality-based and desparately needed rural clinical experience. You the faculty coordinator will soon see the impact this rural clinical option will have on your students and the profession of nursing, by encouraging more nurses to practice their skills in the rural areas of this country.

APPENDICES

1. Rural Clinical Option Brochure and cover letter (sample)
2. Student Fact Sheet (sample)
3. Faculty Fact Sheet (sample)
4. Agency Information Sheet and Agency Narrative (sample)
5. Placement Facility File (sample entries)
6. Common Nursing Specialties
7. Letter of Agreement confirming placement facility (sample)
8. Preceptor Fact Sheet (sample)
9. Guidelines for RCO Preceptors
10. Letter of confirmation to preceptors (sample)
11. Letter and certificate of thanks to preceptors (sample)
12. Rural Clinical Option Application (sample)
13. Letter of Agreement confirming student participation and cover letter (sample)
14. Housing requests, Community Information Sheet, and newspaper ads (samples)
15. Participant Housing Questionnaire (sample)
16. Housing Provider Questionnaire (sample)
17. Letters of Confirmation to landlord and participant (sample)
18. Format for Participant Orientation Session and Participant Packet Checklist
19. Required activities
20. Newsletter (sample)
21. Preceptor Packet Checklist
22. Form letters
23. Post-Placement Debriefing Questions
24. Form for Preceptor's Evaluation of Participant

Appendix 1

Rural Clinical Option Brochure (Sample)

and

Rural Clinical Option Cover Letter

Rural Clinical Nurse Placement Center

RCNP Center

What is the RCNP Center?

The RCNP Center provides the opportunity for nurses and student nurses to gain clinical experience in a rural setting.

A shortage of nurse clinicians exists in the rural areas of Northern California. It is hoped that through participation in RCNP, more and more nurses will discover the benefits of rural life and consequently seek employment in these areas. The center not only affords the opportunity to find out firsthand what rural nursing is like, but it also provides excellent possibilities for future employment.

Rural nursing is unique in that the rural nurse is involved in a greater variety of roles compared to the more specialized role of urban nursing.

Rural Lifestyle

The lifestyles enjoyed by rural nurses can be as varied as the setting in which they might be located. Placement can be anywhere from pastoral valley farmlands to sleepy mountain retreats.

Placements are available in nearly all areas of Northern California.

The rural lifestyle is quite different from that of the metropolitan area. Generally the pace is much slower and more relaxed and there are plenty of wide open spaces to enjoy. If you think you might want to experience rural living, while at the same time gain valuable nursing experience, this program is for you.

Preceptors

Clinical preceptors—RNs, PHNs, MDs, FNPs, and PAs work with participants on a one-to-one basis. These preceptors are available in acute hospitals, health departments, home health agencies, physicians' offices/clinics, Indian health projects, mental health facilities, and convalescent hospitals. Preceptors also help the participants become acquainted with other people and activities in the community.

Communication

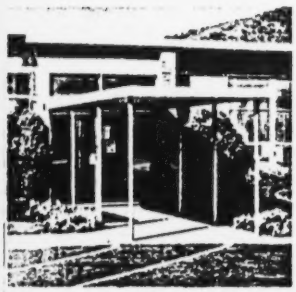
Center staff initiate communication between the participant and the preceptors. They also will make at least one visit with the participant and the preceptor to facilitate the accomplishment of the participant's learning objectives.

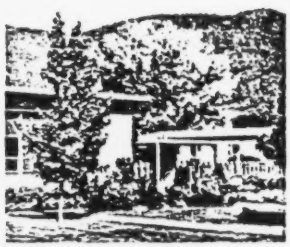
Housing

Economical housing arrangements, usually room with kitchen privileges, are made for students by RCNP Center staff.

Availability

This clinical placement is available year-round. It provides opportunities for nurses to obtain experience in both distributive





and episodic health care. This is a preceptor based experience. Therefore the number of placements is directly related to the availability of facility space and preceptors.

Qualifications/ Prerequisites

As outlined below, both student nurses and registered nurses may participate in RCNP. Depending on the individual's situation, academic and/or BRN continuing education units can be obtained. All participants are required to provide their own transportation and carry malpractice insurance.

Student Nurses—There are two options available for student nurses who wish to participate in RCNP.

1 The student can participate through his/her own school of nursing if:
   - —The school is located in California.
   - —RCNP can be taken as a clinical option for which he/she will receive academic credit.
   - —A faculty person is available to act as faculty coordinator for RCNP.
   - —The student is presently in, or entering, the senior level of his/her nursing program.
2. The student can participate through the extension course, "Rural Nursing Preceptorship," offered at CSU, Chico if:
   - —The student is presently in, or entering, the senior level of his/her nursing program.
   - —The student has graduated, taken boards, but not yet received results (IP).
   - —RCNP is not available as a clinical option through his/her school of nursing or the student's school of nursing is outside California.

Registered Nurses—Registered Nurses can participate in RCNP and receive credit in one of two ways:

1. The RN can enroll for BRN continuing education units (30 CEU's for a 2 week placement).
2. As a second option, the RN may elect to enroll at CSU, Chico to receive extension credit (N185) as well as BRN credit. The minimum placement period is 2 weeks.

Exclusively for Rural Nurses

Nursing administrators and staff in the rural facilities have identified a need for a program which allows rural nurses to gain exposure and experience in larger facilities. The clinical diversity inherent in rural nursing necessitates the development of a wide spectrum of clinical skills. In any given day, the nurse may be asked to utilize her clinical skills in OB, ER, pediatrics, etc. Yet a problem exists in that oftentimes the nurse's exposure to certain types of cases may be very sporadic. Thus, it is sometimes difficult to maintain expertise in these areas. RCNP can provide an opportunity for rural nurses to sharpen their skills and gain exposure to techniques which may be new and/or different. To accomplish this, placements will be in the larger towns in our service area: Redding, Chico, and also larger metropolitan areas such as Sacramento. This type of placement is available for either 30 BRN continuing education units or for both extension credit and BRN continuing education units.

Information

For more information about this unique clinical experience and an opportunity to investigate future employment possibilities, contact:

Rural Clinical Nurse Placement Center
California State University, Chico
Chico, California 95929-0301
(916) 895-5797/895-5798

.....

For more information complete the following and mail to RCNP:

Name_____ Phone ( ) _____

Street _____

City_____ Zip _____

Please check one of the following options and provide the additional information requested.

____I plan to participate through my school of nursing.
Grad. date_____ School of Nursing _____

____I plan to enroll in the CSU extension course.
I am interested in receiving Continuing Education units.
Yes_____ No_____

____I am a RN and wish to enroll only for C.E. units.

I am interested in participating in the following Quarter/Semester:

_____Fall _____Winter _____Spring _____ Summer
_____Christmas Intersession of _____
(year)

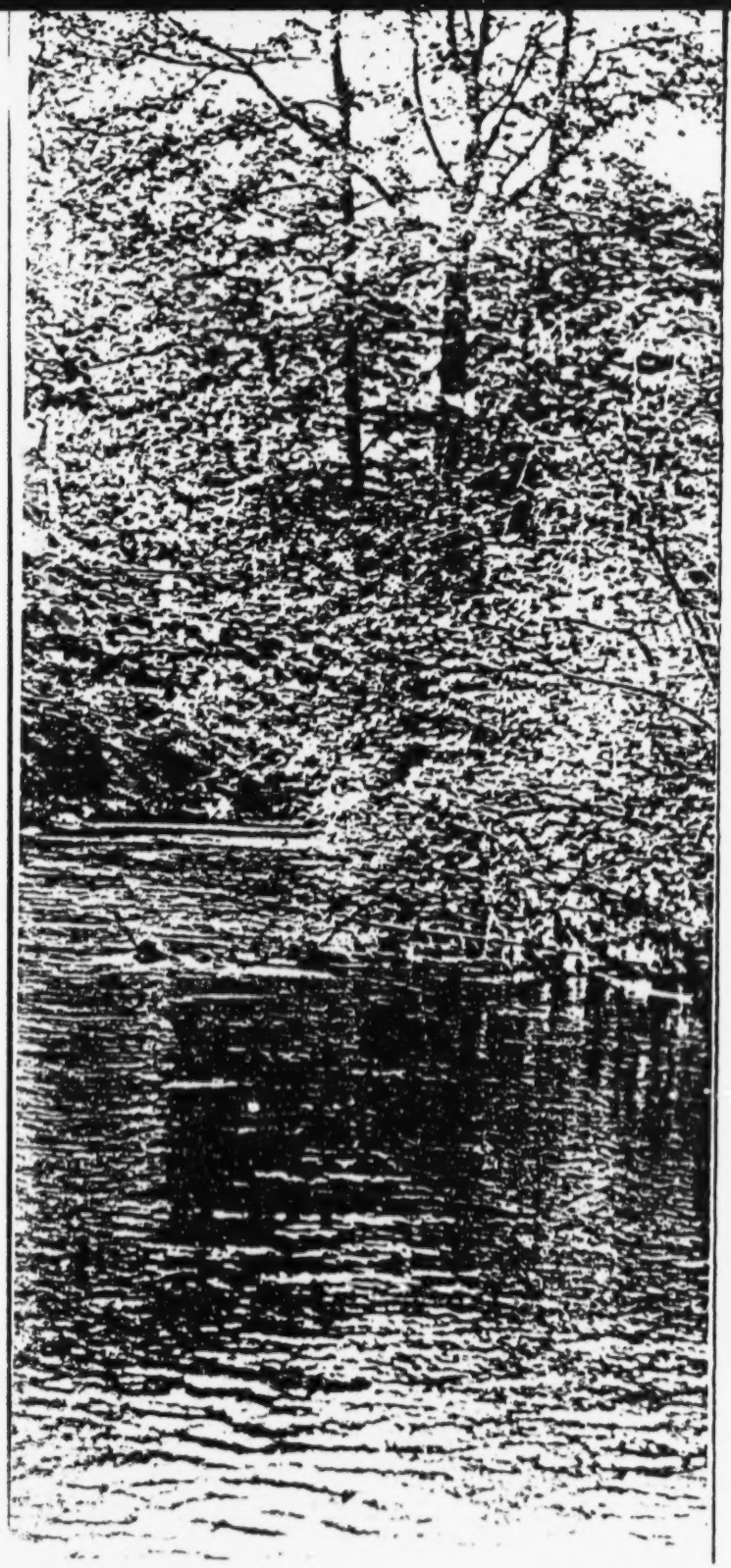
BEST COPY AVAILABLE

RURAL CLINICAL NURSE PLACEMENT CENTER

Fees as of July, 1986:

Extension Credit for "Rural Nursing Preceptorship" N185 - $65/unit. (This fee includes BRN Continuing Education for those who wish to receive it.)

BRN Continuing Education Units only - $25 for 30 Continuing Education Units (2 week placement).



California State University, Chico
Chico, California 95929-0301

Rural Clinical Nurse Placement Center
(916) 895-5797

Ms. Grizelda Swartz
1234 Maple Street
Milpitas, California 94218

Dear Grizelda:

We are delighted that you are interested in the Rural Clinical Nurse Placement Center. Enclosed please find an application, sample objectives, housing information, housing questionnaire and additional informational material. The information on the housing questionnaire assists us in making housing arrangements for you. We send a copy of this information to the future housing provider. It gives them a more complete picture of who you are, which provides for a more compatible match. Please remember to fill out the reverse side of the questionnaire! Complete and return it even if your answer to the first question is that "yes" you have housing available.

It is essential that unless special arrangements are made, the enclosed questionnaires and your typed learning objectives be completed and returned to our office at least SEVEN WEEKS prior to your requested placement date. The earlier we received information pertaining to your placement preference and the learning experience you desire, the better able we are to locate an appropriate preceptor and health facility.

There are two options available which make it possible for student nurses to participate in RCNP:

1) Students can participate through their own school of nursing if:

   - The school is located in California.
   - RCNP can be taken as a clinical option for which they will receive academic credit.
   - The student is presently in, or entering, the senior level of his/her nursing program.
   - The student has malpractice insurance and transportation.

2) Students can enroll in a CSU, Chico extension course entitled "Rural Nursing Preceptorship." The fee is $65 per unit and the course must be taken for a minimum of 2 units of academic credit. The course is available year round. Applicants can participate through the extension course, "Rural Nursing Preceptorship," offered at CSU, Chico, if:

   - The applicant is a student presently in, or entering, the senior level of his/her nursing program, and RCNP is not available as a clinical option through his/her school of nursing. (If the student's school of nursing is outside California, the student must apply through the extension course.)

   - The student has malpractice insurance and transportation.

Registered Nurses not enrolled in a school of nursing may enroll through CSU, Chico for C.E. units. The cost for 30 units of C.E. credit is $25. A minimum of two weeks (90 hours) is required.

Occasionally, RN's wish to receive academic credit in addition to C.E. credit. As mentioned, the CSU, Chico extension couse, "Rural Nursing Preceptorship" is available for a fee of $65/unit with a 2 unit minimum. This fee also includes C.E. credit - no additional fee is required to receive C.E. units if the RN is enrolled for academic credit.

The following is our schedule of placements for the next year. The dates are very flexible - individual schedules can always be accommodated.

Aug. 25	-	Oct. 3, 1986	April 6	-	May 15, 1987
Oct. 20	-	Nov. 29, 1986	May 18	-	June 26, 1987
Dec. 29	-	Feb. 6, 1987	July 6	-	Aug. 14, 1987
Feb. 16	-	March 27, 1987	Aug. 17	-	Sept. 25, 1987

If you have any questions or wish further information, please contact us. We are looking forward to hearing from you again.

Sincerely,

Sandra Stuart-Siddall, R.N., M.S.
Director

Jean Lawrence, R.N., B.S.
Clinical Coordinator

SSS/JL:ls

Enclosures

Appendix 2

Student Fact Sheet (Sample)

Rural Clinical Nurse Placement

PARTICIPANT FACT SHEET

What is it?

The Rural Clinical Nurse Placement Center (RCNP) is designed to provide you with a unique experience in rural nursing. It can be a clinical option in a required nursing course, an elective in the nursing curriculum, or it can be taken as a CSU, Chico extension course (N185). Participants receive academic credit.

Who is eligible?

- Senior nursing students from Baccalaureate, Associate Degree or Diploma Programs
- Master's students
- Registered nurses no longer affiliated with a school of nursing (RNs in this category must enroll in N185).

Where is it located?

Clinical experiences are available in the mountain and valley communities of northern California. The 18 counties included are Butte, Colusa, El Dorado, Glenn, Humboldt, Lassen, Mendocino, Modoc, Placer, Plumas, Shasta, Siskiyou, Sutter, Tehama, Trinity, Tuolumne, Yuba, and Yolo.

How does it work?

For those of you participating through your nursing school, you and your instructor determine your individual learning objectives. This is done within the context of the overall course objectives. If you are participating in the CSU extension course, *Preceptorship in Nursing*, contact RCNP. Your instructor for the course will assist you in developing learning objectives. On the basis of your learning objectives, you are placed with a qualified preceptor in a one to one relationship. A communication network is established by RCNP staff between you, your preceptor, and your instructor. Regular visits are made to you and your preceptor by RCNP staff. You attend seminars every 3-4 weeks conducted by RCNP staff.

When is it available?

Placements are available on a year-round basis.

What time is involved?

For student nurses, 6-8 weeks placement are recommended for a minimum of three days per week. This will depend on your course's requirements. Registered nurses may participate for a minimum of 2 weeks, although longer placements are recommended.

What kind of experiences are available?

- Acute Hospitals—vary in size from 24-200 beds. Experiences in the broad range of patient care problems are available in general medical, surgical, orthopedic, OB, peds, ER. An opportunity to observe RNs in their multi-dimensional roles. Specialized experiences are often available in some larger hospitals during Summer/Intersession, i.e., ICU, ER.
- Community Health—health departments, home/visiting nursing, neighborhood clinics, Indian Health Projects, community mental health, developmentally disabled.
- Convalescent/Extended Care Facilities—reminiscent therapy, adult education classes, special projects (gardens, animals), work with creative nurses who are change agents.
- Health Clinics—varied services and populations served—Indian, migrant, middle and low income, women.
- Limited number of experiences are available for Master's students in administration, inservice education, and clinical practice.

The concept of continuity of care is operationalized through a minimum of three (3) days planned learning experience in a setting other than your principle placement site. For example, if you are placed in an acute hospital, you will have at least 3 days in a clinic and/or community health setting.

Who are my preceptors?

Professionals with clinical/organizational competence who are interested in assisting you to grow. Your preceptor will be an RN, PA, FNP, PHN or MD. They will hold weekly conferences with you. They will also evaluate you at the completion of your clinical experience as to the ways in which you achieved your learning objectives and met your course objectives. Your instructor's evaluation form will be used.

What is RCNP's role?

RCNP staff identify qualified preceptors and work with faculty, students, and preceptors to maintain optimum conditions in which you can achieve your learning objectives. This includes orientation, regular and requested visits to your placement site, telephone availability, evaluations, seminars for you every 3-4 weeks in centrally located communities. RCNP will also arrange your housing accommodations.

What is my instructor's responsibility?

- Review/approve your learning objectives.
- Determine what you are to do in order to achieve the course's objectives while you're away from campus.
- Communicate with your preceptor.
- Provide your preceptor with an evaluation form to use at the end of your clinical experience.

What is my responsibility?

- Prepare *specific* learning objectives—have them approved by your instructor.
- Complete an RCNP Application and mail it to the address noted on this Fact Sheet with your learning objectives AT LEAST 7 weeks prior to the requested placement date.
- Communicate with your preceptor before placement.
- Participate in the Rural Clinical Nurse Placement Center—orientation, seminars, and evaluations.
- Write a daily log.
- Complete your learning objectives and course objectives.
- Be covered by your individual or school professional liability insurance and health insurance. Carry the state required automobile insurance.

How much will it cost?

- Room and Board—cost varies—this usually is in a private home.
- Gasoline—varies depending on your learning objectives and placement location.
- Recreation—varies—many outdoor activities available at little or no cost. Plan on some fun activities.
- Extension Course Fee—for those participating through N185 at CSU, Chico.

What's my payoff?

You can:
- Experience nursing/health care in a rural setting.
- Check out living in a rural area.
- Gain ideas about future employment options.
- Spend six weeks or more in beautiful northern California.
- Be close to recreational activities—boating, swimming, skiing, camping, hiking . . . .

What do I do now?

- Talk to your instructor and/or contact RCNP.
- Make plans at least 3 months in advance to use RCNP as a clinical option, elective, or extension course.
- DREAM.....PLAN.....PARTICIPATE.....ENJOY!!!

For more information contact:

Rural Clinical Nurse Placement Center
California State University, Chico
Chico, California 95929-0301
(916) 895-5797/895-5798

Appendix 3

Faculty Fact Sheet (Sample)

Rural Clinical Nurse Placement

FACULTY FACT SHEET

What is it?

The Rural Clinical Nurse Placement Center (RCNP) is designed to assist you to provide a unique nursing experience for senior students, Master's students, and those just graduating who want to experience nursing in a rural area. It can serve as a clinical option in a required course, an elective in your curriculum, or as a Summer/Intersession course. Academic credit is granted by your program, or by CSU, Chico through the extension program.

Where is it?

Clinical experiences are located in nearly all the mountain and valley communities of northeastern California.

How does it work?

You and your student determine his/her learning objectives. RCNP is contacted and your student is placed with a qualified preceptor in a one to one relationship. A communication network is established by RCNP staff between faculty-student-preceptor. Regular visits are made to student/preceptor by RCNP staff. Seminars are held every 3-4 weeks by RCNP staff in a centrally located community.

When is RCNP available?

Placements are available on a year round basis.

What time is involved?

6-8 weeks placement are recommended for a minimum of three days per week. This will depend on your course's requirement.

What kinds of experience are available?

- Acute Hospitals—vary in size from 24-160 beds. Experience in the broad range of patient care problems are available in general medical, surgical, orthopedic, OB, peds, ER. An opportunity to observe RNs in their multi-dimensional roles. Specialized experiences are often available in some larger hospitals during Summer/Intersession, i.e., ICU, ER.
- Community Health—health departments, home/visiting nursing, neighborhood clinics, Indian Health Projects, community mental health, developmentally disabled.
- Convalescent/Extended Care Facilities—reminiscent therapy, adult education classes, special projects (garden—animals), work with creative nurse change agents.
- Health Clinics—varied services and populations served—Indian, migrant, middle and low income, women.
- Limited number of experiences are available for Master's students in administration, inservice education and clinical practice.

The concept of continuity of care is operationalized through a minimum of three (3) days planned learning experience in a setting other than the principle placement site. For example, a student placed in an acute hospital has at least 3 days in a community health and/or clinic setting.

Who are the preceptors?

Professionals with clinical/organizational competence who are interested in assisting students to grow. A preceptor can be a RN, PHN, PA, MD, or FNP. They are oriented to their role by RCNP. Ongoing consultation is available to them. The preceptors will hold weekly conferences with your student. They will participate in the student's evaluation using **your** evaluation tool.

Can I visit my student(s)?

Yes. Contact the RCNP office to facilitate arrangements.

What is RCNP's role?

RCNP staff identify qualified preceptors and work with students, preceptors, and faculty to maintain optimum conditions in which students achieve their learning objectives. This includes orientation, regular and requested visits to student placement sites, telephone availability, student seminars every 3-4 weeks, and evaluation. Housing accommodations are arranged by RCNP.

What are the student's responsibilities?

- Prepare **specific** learning objectives. Have faculty member approve them.
- Fill out RCNP information sheet and mail it **with** learning objectives AT LEAST 7 weeks prior to requested placement date.
- Communicate with preceptor and housing provider before placement.
- Participate in Rural Clinical Nurse Placement Center orientation, seminars, and evaluations. Write a daily log.
- Complete learning objectives and course objectives.
- Be covered by individual or school professional liability insurance and health insurance. Carry state required automobile insurance.

What are the costs to the student?

- Room and Board—cost varies—usually in a private home.
- Gasoline—varies depending on student's learning objectives and placement location.
- Recreation—varies. There are many outdoor activities available at little or no cost.

What are the student's rewards?

An opportunity to:

- Experience nursing/health care in a rural setting.
- Experience living in a rural area.
- Investigate future employment options.
- Spend six weeks or more in beautiful northeastern California.
- Enjoy many recreational activities—boating, swimming, skiing, camping, hiking . . . .

What do I, as a faculty member, do?

- Request more information about RCNP.
- Relay the information to your colleagues/students.
- Respond by using the Rural Clinical Nurse Placement Center as an adjunct to your nursing curriculum.

For more information contact:

Rural Clinical Nurse Placement Center
California State University, Chico
Chico, California 95929-0301
(916) 895-5797/895-5798

Appendix 4

Agency Information Sheet and Agency Narrative (Samples)

PRECEPTOR/AGENCY INFORMATION SHEET

1. Agency Name:

   Address:

   Telephone:

2. Administrator or Director:

3. Director of Nursing:

4. Agency Staff (types and number of positions):

5. Size of facility (specialty departments, number of beds, etc.):

6. Accreditation:

7. Agency Owner:

8. Source of financial support:

9. Describe surrounding community (please include population):

10. Please list and describe services and programs provided:

11. Average census or number of client visits:

12. Hours of operation:

(OVER)

PRECEPTOR/AGENCY INFORMATION SHEET

1. Agency Name: MERCY MEDICAL CENTER

   Address: Clairmont Heights, Box 6009, Redding, CA 96099-6009

   Telephone: (916) 243-2121

2. Administrator or Director: George Govier

3. Director of Nursing: Evelyn Chase

4. Agency Staff (types and number of positions):

   RN - 245
   LVN - 89
   NA/US/EMT/Surg. Tech. - 100

5. Size of facility (number of beds, number of rooms, and number of staff):

   Beds: 200 Staff: 886

6. Accreditation: JCAH, CMA CALS

7. Agency Owner: Sisters of Mercy

8. Source of financial support: Non profit

9. Describe surrounding community: Urban area surrounded by lakes, and mountains. Service population 100,000

10. Please list and describe services and programs provided:

    In-patient services: OR, Recovery Room ICU, CCU, Med-surg., OB/ICN, ABR, pediatrics, ER, lab, x-ray, oncology, DOC (telemetry)
    Out-patient services: ER, lab x-ray, pharmacy, radiation therapy, nuclear medicine, physical therapy, respiratory therapy, social service, mobile intensive care unit. Trauma, NIVL, sonography, free standing ambulatory surgery center, hospital based Home Health Agency.
    Special services: diabetic classes, CPR classes, pediatric orentation for hospitalized children, parenting classes, prenatal, enterostomal therapist

11. Average census or number of client visits: 188

12. Hours of operation: 24°

13. As a preceptor, what experiences do you feel the student needs to participate in in order to understand your role and that of your agency?

    To come and work with their preceptor in various departments. The preceptor can arrange for various learning experiences.

(over)

Appendix 5

Placement Facility File (Sample entries)

Placement Facility File

HOSPITALS

SISKIYOU COUNTY

Mt. Shasta-Eskaton Health Center (Mt. Shasta)

General hospital, 33 beds, med/surg., respiratory therapy, lab., x-ray, ER, some surgery.

MODOC COUNTY

Modoc Medical Center (Cedarville)

County owned, 22 bed facility offering medical, minor surgery, OB, lab., x-ray, and ER. One doctor on staff. Rural health clinic next door.

Modoc Medical Center (Alturas)

County owned, 32 bed facility offering medical, minor surgery, OB, lab., x-ray, and ER. Doctor's office in house.

CONVALESCENT HOSPITALS

COLUSA COUNTY

Colusa has one Convalescent Hospital.

BUTTE COUNTY

Chico has four Convalescent Hospitals, 60 to 120 beds, all fulfill skilled nursing facility criteria.

Oroville has two Convalescent Hospitals.

Paradise has three large, accredited Convalescent Hospitals. (Retirement community.)

YUBA COUNTY

Yuba City has one accredited S.N.F. and one board and care convalescent facility with an activity program.

COMMUNITY HEALTH

SISKIYOU COUNTY HEALTH DEPARTMENT (Yreka)

Contract County - three PHN's. Standard range of services.

sensory-motor stimulation, activities of daily living, and specialized teaching is in progress.

GLENN COUNTY

Glenn County Mental Health (Willows)

State funded and accredited, small but capable of variety of services. Has a 5 bed wing of the Glenn General Hospital, and offers outpatient group therapy, home visits, individual counselling, crisis intervention, day care, child and adolescent programs. About 10 staff - psychiatrist, psychologist, mental health worker, drug and alcohol counselor, social worker, psychiatric technicians and an RN.

SPECIAL HEALTH PROJECTS

SISKIYOU COUNTY

The Shasta-Trinity-Siskiyou Rural Indian Health Project is administratively based in Anderson; the Project Director and Project Physician are located there. Some funding comes from California Rural Indian Health Board (CRIHB). Community Health Representatives live and work in the three counties served. A medical/dental clinic operates in Anderson.

The Shasta-Trinity-Siskiyou Rural Indian Health Clinic in Fort Jones where RCNP students are placed, has been in operation since Fall 1977, when it took the place of the mobile van that operated out of Callahan. Terry Naylor, Family Nurse Practitioner, is the sole health provider with the project physician as her preceptor. She provides complete health screening/examination for adults and children which includes an EKG, audiometry, eye exams and thyroid screening. Patient referral and consultation is ongoing with specialists in Medford, Oregon and Redding. Outreach programs are also done. Usual census is 80-100 patient visits per month. Other clinic staff include an assistant, office manager, clerical staff and part-time dentist.

LASSEN COUNTY

The Susanville Convalescent Hospital is a skilled nursing facility with 96 beds. 48 beds are used for the State Developmentally Disabled Program utilizing sensory/motor, daily activities training and therapy.

MODOC COUNTY HEALTH DEPARTMENT (Alturas)

Contract County - one PHN (Don Prine) travels throughout 2,000 square miles. Standard range of services.

TRINITY COUNTY HEALTH DEPARTMENT (Weaverville)

Contract County - one PHN (David Humes) travels to small towns for clinics. Standard range of services.

RURAL HEALTH CLINICS

SISKIYOU COUNTY

Happy Camp has a community supported outpatient clinic. They staff one National Health Service Corps (NHSC) physician, a physician's assistant, and several R.N.'s. Health maintenance services and minor emergency care. Average 20 patients/day. Outreach program is being developed.

Scott Valley Rural Health Clinic in Etna, is community supported and has two NHSC physicians. No nurses are on the staff. A general medical clinic, minor ER care, OB patients are referred out.

MODOC COUNTY

Modoc Rural Health Clinic in Cedarville has two Family Nurse Practitioners, with an M.D. for consultation, complete general health maintenance services including family planning, prenatal and post-partum care. Average monthly census is 200-300 visits. Work with Public Health Nurse in outreach programs.

LASSEN COUNTY

Westwood Rural Health Clinic in Westwood is a rural health clinic providing primary care. One physician, a Family Nurse Practitioner, an R.N., and a Family Planning Counselor are on the staff. This clinic was opened in Spring of 1978. Their clientele is growing rapidly. A large part of their client population is made up of young families reflecting the makeup of this reactivated former lumbering town.

MENTAL HEALTH FACILITIES

SISKIYOU COUNTY

Siskiyou County Mental Health (Yreka)

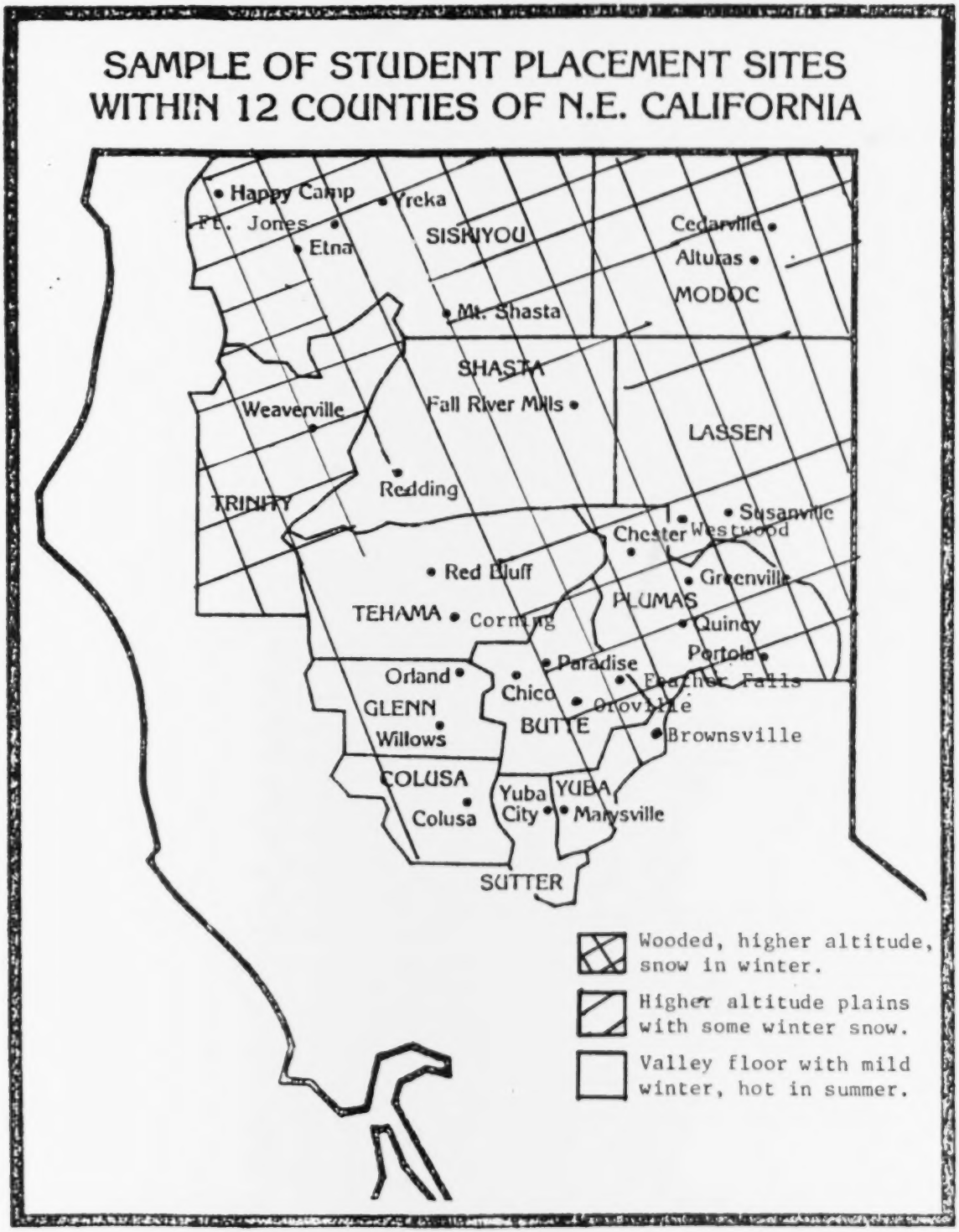
Psychiatrist and RN - utilizes acute hospitals in Yreka and Mt. Shasta for inpatient services. Provides individual and group counselling. Outreach through crisis clinics in outlying towns.

LASSEN COUNTY

Susanville Convalescent Hospital (Susanville)

48 beds of this 96 bed facility are for a state funded Developmentally Disabled Care Program. An active daily schedule of

Map of Service Area and Placement Facilities



Appendix 6

Common Nursing Specialties

COMMON NURSING SPECIALTIES

ACUTE HOSPITALS

- Emergency Room - Ambulance skills
- Obstetrics - Newborn
- Medical
- Surgical
- Intensive Care Unit
- Recovery
- Team Leading
- Pediatrics
- Special Services:
  - Respiratory therapy
  - Intra-venous therapy
  - Physical therapy
  - Pre-operative preparation
  - Inservice Education
  - Discharge Planning
  - Utilization Review
  - Infection Control
  - Supervision
  - Diet Counselling

COMMUNITY HEALTH

- Community health/needs assessment
- Home visits - assessment and teaching
- Clinic nursing:
  - Chest
  - Veneral Disease
  - Family Planning

Prenatal

Abortion

Infants and children

Immunizations

Special groups:

Developmentally Disabled

Crippled Children's Services

Tuberculosis

Child Protective Services

MENTAL HEALTH

Inpatiant Care

Outpatient Follow-up

Day Care Clinics

Group/Individual therapy

Assessment counselling

Crisis Intervention

CONVALESCENT HOSPITAL

Gerontology

Geriatrics

Chronic Illness

Rehabilitation:

Physical

Psycho-social

Inservice

Utilization Review

RURAL HEALTH CLINICS

Ambulatory - family health care

Assessment

Teaching

Treatment

Referral

Follow-ups

Emergency - minor surgery

Immunizations

Family Planning

Prenatal care and teaching

Birthing

SPECIAL HEALTH PROJECTS

Migrant Workers

Foreign language groups

Teaching amid alternate life-styles

Assessment

Cultural differences

Appendix 7

Letter of Agreement and cover letter
confirming placement facility (Samples)

California State University, Chico
Chico, California 95929-0301

Rural Clinical Nurse Placement Center
(916) 895-5797

Ms. Marie Holbrook, R.N.
Modoc Rural Health Clinic
P.O. Box 521
Cedarville, California 96104

Dear Ms. Holbrook:

We sincerely appreciate your participation in our program and we are looking forward to working with you and your health agency during the student's placement!

In order to proceed with the placement it is necessary that a Letter of Agreement be signed between your agency and the Rural Clinical Nurse Placement Center (RCNP). Enclosed you will find the Letter of Agreement that applies to the student who will be placed with you. As you will note, it has already been signed by representatives of the student's school, CSU-Chico and RCNP. After reviewing and signing the document please make a copy to retain for your files. We request that the original be returned to us as soon as possible - it is essential that this document be on file at CSU-Chico.

Thank you very much for expediting this matter. Please contact us if you have any questions.

Sincerely,

Sandra Siddall

Sandra Stuart-Siddall, R.N., M.S.
Director

Jean Lawrence

Jean Lawrence, R.N., B.S.
Clinical Coordinator

JL:pt
Enclosure

8/84

LETTER OF AGREEMENT

The _____, the Rural Clinical Nurse Placement
Educational Institution

Center - California State University, Chico, and _____
Health Agency/Individual

_____ hereinafter referred to as the health agency, agree to

the following responsibilities related to students enrolled in _____
Educational

_____ who are participating in the Rural Clinical Nurse
Institution

Placement Center and receiving field instruction in the above agency.

I. The Educational Institution shall:

A. Select educationally prepared students for this rural clinical placement experience.

B. Provide for a nursing faculty member to collaborate with the health agency clinical preceptor and Rural Clinical Nurse Placement nursing staff.

C. Approve the student's learning objectives which will then be sent to the RCNPC and the Clinical Preceptor.

D. Determine the units of academic credit to be granted to the student who successfully completes this clinical option.

E. Provide an evaluation form for the student and clinical preceptor to complete at the conclusion of the student's experience.

F. Submit an evaluation of the student's learning experience to the Rural Clinical Nurse Placement Center upon completion of that experience.

II. Rural Clinical Nurse Placement Center - California State University, Chico shall:

A. Have nursing staff available at all times for consultation to students, faculty, and clinical preceptors.

B. Make regular and requested visits to clinical placement sites where students are assigned.

C. Provide the health agency with information about the student prior to his/her arrival.

D. Notify the educational institution of the placement site and preceptor the student will be assigned to.

E. Orient clinical preceptors to the placement program and their role as clinical preceptors as needed.

F. Orient students to the program, the community, and the agency to which assigned as well as their responsibilities as participants in this placement program.

G. Obtain documentation demonstrating that each student is covered by professional liability insurance.

H. Will not assume financial responsibility for student while he/she is participating in this placement program.

III. The Health Agency shall:

A. Provide each student with clinical experiences necessary to meet his/her learning objectives.

B. Designate an appropriate staff member to act as the clinical preceptor who will assume responsibility for student supervision.

C. Provide the resources needed for a desirable learning climate.

D. Assure that staff is adequate in number and quality to insure safe and continuous health care to individuals.

E. Provide Rural Clinical Nurse Placement nursing staff and faculty access to the agency and agency staff.

F. Orient Center staff or faculty and students to the agency purposes, policies, and procedures.

G. Within its limited service capabilities provide emergency care for students in case of injury, with any financial liability assumed by the student for that service.

H. Shall not financially compensate any student receiving academic credit according to this Agreement nor shall students be considered employees of the health agency.

I. Have the right, after consultation with the Rural Clinical Nurse Placement Center and the educational institution to refuse to accept or continue any nursing student, who in the health agency's judgment, is not participating satisfactorily or safely in this placement.

J. Any problem reflecting on the qualifications of a student shall be immediately called to the attention of the Rural Clincal Nurse Placement Center and the educational institution.

K. Maintain standards accepted by appropriate accreditating bodies, as applicable.

L. Participate in written evaluations of the student's performance and of the Rural Clinical Nurse Placement Center.

IV. The parties of this Agreement shall not discriminate against any student because of age, sex, or national origin.

V. Financial responsibility:

By this Agreement none of the parties incur any responsibility for financial exchange whether in monies or in kind.

VI. Period of Agreement:

This Agreement shall be in effect beginning _____, 19__ and shall remain in effect for one year from the date of Agreement or until terminated by one of the parties who shall provide three (3) months written notice of their decision. This Agreement automatically terminates upon the termination of the Rural Clinical Nurse Placement Center.

VII. This Agreement may at any time be altered, changed or amended by mutual agreement of the parties in writing.

IN WITNESS WHEREOF, this Agreement has been signed by and on behalf of the parties identified above.

For the Educational Institution:

By_____ Date_____
Chairperson, Nursing Program

By_____ Date_____
Representative of Educational Institution

For the Rural Clinical Nurse Placement Center:

By_____ Date_____
Director

For the California State University, Chico:

By_____ Date_____
Contracting Supervisor

For the Health Agency:

By_____ Date_____
Nursing Service Administrator

By_____ Date_____
Agency Administrator or Physician

California State University, Chico
Chico, California 95929-0301

Rural Clinical Nurse Placement Center
(916) 895-5797

Ms. Marie Holbrook, R.N.
Modoc Rural Health Clinic
P.O. Box 521
Cedarville, California 96104

Dear Ms. Holbrook:

We sincerely appreciate your participation in our program and we are looking forward to working with you and your health agency during the student's placement!

In order to proceed with the placement it is necessary that a Letter of Agreement be signed between your agency and the Rural Clinical Nurse Placement Center (RCNP). Enclosed you will find the Letter of Agreement that applies to the student who will be placed with you. As you will note, it has already been signed by representatives of the student's school, CSU-Chico and RCNP. After reviewing and signing the document please make a copy to retain for your files. We request that the original be returned to us as soon as possible - it is essential that this document be on file at CSU-Chico.

Thank you very much for expediting this matter. Please contact us if you have any questions.

Sincerely,

Sandra Siddall
Sandra Stuart-Siddall, R.N., M.S.
Director

Jean Lawrence
Jean Lawrence, R.N., B.S.
Clinical Coordinator

JL:pt
Enclosure

8/84

Appendix 8

Preceptor Fact Sheet (Sample)

PRECEPTOR FACT SHEET

What is RCNP?

The Rural Clinical Nurse Placement Center (RCNP) provides the opportunity for nurses and student nurses to gain clinical experience in a rural setting.

A shortage of nurse clinicians exists in the rural areas of Northern California. It is hoped that through participation in RCNP, more and more nurses will discover the benefits of rural life and consequently seek employment in these areas. The center not only affords the opportunity to find out firsthand what rural nursing is like, but it also provides excellent possibilities for future employment.

In addition, RCNP provides an opportunity for **rural nurses** to sharpen their skills and gain exposure to techniques which may be new or different. To accomplish this, we also offer placements in larger towns and cities.

What is a preceptor?

A preceptor is a Registered Nurse, Public Health Nurse, Family Nurse Practitioner, Physician's Assistant or Physician who is licensed to practice in the state of California. This health professional is: a) knowledgeable in the area of nursing or medicine in which he/she practices, and b) interested in working with a student on a one to one basis.

Who are the participants?

As outlined below, both student nurses and registered nurses may participate in RCNP. Depending on the individual's situation, academic and/or BRN continuing education units can be obtained. All participants are required to provide their own transportation and carry malpractice insurance.

Student Nurses—Student nurses participate for a minimum of 4 weeks and enroll in the program in one of two ways:

1. The student can participate through his/her own school of nursing if:
- The school is located in California
- RCNP can be taken as a clinical option for which he/she will receive academic credit
- A faculty person is available to act as faculty coordinator for RCNP
- The student is in, or entering, the senior level of his/her nursing program

2. The student can participate through the extension course, "Rural Nursing Preceptorship," offered at CSU, Chico if:
- The student is presently in, or entering, the senior level of his/her nursing program, and RCNP is not available as a clinical option at the school.

OR

- The student's school is outside California

OR

- The student has graduated, taken boards, but not yet received results (IP).

Registered Nurses—Registered Nurses can participate in RCNP and receive credit in one of two ways:

1. The RN can enroll for BRN continuing education units (30 CEU's for a 2 week placement).

2. As a second option, the RN may elect to enroll at CSU, Chico to receive extension credit (N185) as well as BRN credit. The minimum placement period is 2 weeks.

Why do student's request a rural placement?

- Personal interest in living and working in a rural area after graduation.
- Opportunity to nurse in a different setting—most nursing programs are located in urban areas.
- Chance to find out if they like living in a rural area and if the people in smaller communities will welcome/accept them.
- Opportunity to work on a one to one basis with a health professional who has recognized expertise in his/her field of nursing or medicine.
- To weigh the importance of being a rural RN to help alleviate the RN geographic maldistribution.

What are the preceptor's responsibilities?

- Become informed as to the goals of RCNP.
- Become informed as to the student's learning objectives. These will be mailed to you prior to the student's placement with you and your health facility.
- Review these learning objectives with the student when they are placed with you.
- Determine, with the student, the clinical experiences that will help the student meet these learning objectives.
- Develop a **written** plan with the student that will provide for the necessary supervision and consultation. The student and preceptor are "on duty" at the same time unless prior arrangements are made for an equally qualified health professional to assume responsibility for supervision and/or consultation.
- Decide upon a weekly conference time—30 to 60 minutes. The purpose of the conference is to review the student's progress in achieving the learning objectives; identify and work on solving any problems; plan for special learning experiences; and keep communication open.
- Orient the student to the clinical facility—personnel, policies, procedures, and physical plan.
- Assist the student to become acquainted with the people and activities of the community. This is an opportunity to share your enthusiasm about living and working in a rural area. Also a chance to recruit RNs to become future employees/taxpayers in rural communities.
- Maintain verbal and/or written communication with the student's instructor as mutually agreed upon.
- Participate in the site visits made by RCNP staff.
- Inform RCNP if any problems arise during the student's placement.
- Prepare a written evaluation of the student's progress in meeting his/her learning objectives. Also evaluate the student's attitude and the manner in which he/she demonstrates a professional commitment to patients, staff, preceptor, and agency. The specific form will be provided by the educational institution. Send a copy of the completed form to RCNP.
- Evaluate the total preceptor/student experience as requested by RCNP.

What are the student's responsibilities?

- Prepare specific learning objectives—have them approved by his/her nursing instructor.
- Communicate with the preceptor prior to placement.
- Work and plan closely with the preceptor to achieve these learning objectives.
- Abide by the agency policies.
- Keep the preceptor and RCNP informed as to current local address and telephone number.
- Inform the preceptor and RCNP of any problems that arise during placement.
- Maintain own professional liability insurance or show documentation that the nursing program provides coverage for the student.
- Maintain own health and accident insurance—be responsible for any cost incurred for illness.
- Maintain required automobile insurance.
- Alert preceptor to any schedule alterations and/or academic objective changes.
- Be responsible for all costs of participating in the Program—housing, food, travel, personal expenses.
- Participate in the seminars scheduled every 3-4 weeks by RCNP staff.
- Participate, with the preceptor, in evaluating progress toward achieving his/her learning objectives.
- Evaluate the total learning experience as requested by RCNP.

Appendix 9

Guidelines for RCO Preceptors

GUIDELINES FOR RCNP PRECEPTORS

This set of guidelines was developed as a joint effort by preceptors and RCNP staff.

1) . . . As a Role Model

One cannot "prepare" for role modeling behavior. A preceptor must be himself. The responsibility as a role model, however is to be self-conscious enough to have the student reflect on his behavior as a model, what he is comfortable with, what he is anxious about, and how he handles the demands to be a health professional, citizen, professional colleague, parent, etc. The student needs to see a practitioner, because so much of his or her education, thus far, has been based on the accumulation of facts in academia.

1) a. How many times did you meet with the student and did you allow her an exchange of feedback?

b. Did you feel there was open communication and trust between you and the student?

c. Did you offer support to the student? How?

2) . . . As a Resource Person

This role is probably the most familiar one, and possibly the most overused. The role as a resource should be used when the expert knowledge or skill of the preceptor is necessary for the student to gain competence in this knowledge or skill area.

2) a. Were you willing to share your expertise?

b. Did you take the time to demonstrate procedures, etc. when appropriate?

c. Were you able to assist the student in finding other resources when appropriate?

d. Were demonstrations and explanations clear to the student? How did you know?

3) . . . As a Designer of Instruction

The designer role is one which formalizes the function of structuring the learning/teaching experience of the preceptorship.

3) a. Did you and the student take the opportunity to discuss each other's expectations for the learning experience?

Did you give the student an orientation?

A HANDBOOK ENTITLED

"PRECEPTOR HANDBOOK"

RURAL CLINICAL NURSE PLACEMENT CENTER

is available by writing to:

Rural Clinical Nurse Placement Center

301 Kendall Hall

California State University, Chico

Chico, California 95929-0301

This book is a guide for new preceptors to utilize to familiarize themselves with this new role as "preceptor"

Appendix 10

Letter of confirmation to preceptors (Sample)

California State University, Chico
Chico, California 95929-0301

Rural Clinical Nurse Placement Center
(916) 895-5797

Ms. Marie Holbrook, R.N.
Modoc Rural Health Clinic
P.O. Box 521
Cedarville, California 96104

Re Grizelda Swartz
Orientation in Chico
Placement Dates

Dear Ms. Holbrook:

We are delighted to welcome you again as a preceptor for the Rural Clinical Nurse Placement Center. We appreciate your continuing involvement with our program, and your investment of time and energy with the students. We would like the experience of being a preceptor to always be as rewarding for you as it is for the students.

Enclosed is information regarding your student. In our efforts to streamline our paperwork, we are not sending the regular fact and information sheets. If you do want any of that information - we will be happy to send it to you. Let us know!

Again, the instructor has been asked to send you information on the academic course the student is enrolled in, and the evaluation tool if one is used.

We hope that in our desire to avoid redundancy in our correspondence, we do not leave out any of the information you need. Our primary goal is that of facilitation...so, if we can be of any assistance, please let us know.

Again, welcome. We will be in close touch.

Very sincerely,

Jean Lawrence

Jean Lawrence, R.N., B.S.
Clinical Coordinator

The RCNP Staff includes:

Sandra Stuart-Siddall
Director
Administrator of Center

Jean Lawrence
Clinical Coordinator
Student Placement Facilitator
Housing Coordinator

Pam Thornton
Secretary

JL:pt
Enclosures

Appendix 11

Letter and certificate of thanks to preceptors (Sample)

California State University, Chico
Chico, California 95929-0301

Rural Clinical Nurse Placement Center
(916) 895-5797

Ms. Marie Holbrook, R.N.
Modoc Rural Health Clinic
P. O. Box 521
Cedarville, California 96104

Re: Grizelda Swartz

Dear Ms. Holbrook:

Thank you for being a preceptor for Grizelda Swartz. By giving of yourself, i.e., your time, energy and knowledge, and sharing what you do in your job, you have provided Grizelda with a unique and high quality experience in her nursing education.

We hope that the experience of being a preceptor has been rewarding and worthwhile for you as well.

I am enclosing a brief evaluation form for you to complete. Please be candid in your comments and suggestions. We would like to know if you feel there is anything we can do to improve the student placement experience!

Thank you again! We look forward to placing students with you again in the future.

Very truly yours,

Jean Haberlin, R.N., B.S.
Clinical Coordinator

JH:pd

Enclosure

Rural Clinical Nurse Placement Project

Preceptor Certificate Award

Granted to

_____

This certificate is awarded to the afore named person in recognition of the professional guidance rendered to nursing students participating in the Rural Clinical Nurse Placement Project. It is through this person's unselfish guidance as a preceptor in a health and human service facility, that nursing students are able to gain insight into rural health delivery and nursing.

Awarded this day of _____ 19 _____

_____

Project Director

Appendix 12

Rural Clinical Option Application (Sample)

Rural Clinical Nurse Placement Center

Application

Name: _____ Phone: ( )_____

Street: _____ City and State _____ Zip: _____

Age: _____ Sex: _____ Social Security No: _____

Please check the applicable box and complete the indicated sections:

☐ I am a student nurse and plan to receive academic credit from my nursing program. (Please complete Section A, B, and D)

☐ I am a student nurse and plan to receive academic credit through the CSU, Chico extension course. (Please complete section A and D)

☐ I am an RN and plan to receive academic credit through the CSU, Chico extension course. (Please complete section C and D)

☐ I am an RN and interested only in Board of Registered Nursing CE credit. (Please complete section C and D)

A

1. Name of school: _____
2. Expected date of graduation: _____
3. When will you be in your senior year of nursing? _____
4. Name and address of two nursing instructors who could provide reference statements: _____

_____

_____

5. For those of you who are requesting a community health experience, what community health theory course have you had?

_____

B

1. Name of instructor on your campus to whom you will be responsible: _____

   Office Phone: _____ Home Phone: _____
2. Name of nursing course to which this academic credit will be applied: _____
3. Have you reviewed the *Summary Packet for Student-Faculty Review* available through your school's nursing department?

   ☐ Yes ☐ No

C

1. I am _____; am not _____ interested in receiving C.E. units from the Board of Registered Nursing. The number of units I would like to receive is: _____
2. Name and address of nursing supervisor who could provide a recommendation for you: _____

_____

3. Name of Nursing School: _____ Graduation Date: _____
4. If possible, name and address of former nursing instructor who could provide a recommendation for you: _____

_____

D

1. Are you presently an RN? _____ Date of licensure: _____ License number: _____
2. If you are not an RN, when do you plan to take State Boards? _____
3. I request placement for _____ weeks beginning on the following date: _____
4. Areas of special interest (Example: General med/surg/peds, community health, community mental health, ER, physician's clinics, India... Health Projects): _____

_____

5. I am interested in placement with:

   ☐ Acute Hospital ☐ Community Clinic ☐ Public Health Department ☐ Indian Health Project ☐ Doctor's Office

   ☐ Your idea _____

   Comments: _____

_____

(over)

Appendix 13

Letter of Agreement confirming student participation
and cover letter (Samples)

California State University, Chico
Chico, California 95929-0301

Rural Clinical Nurse Placement Center
(916) 895-5797

Ms. Grizelda Swartz
1234 Maple Street
Milpitas, California 94218

Dear Grizelda:

Greetings! We know you have been waiting to hear about the plans for your clinical placement with the Rural Clinical Nurse Placement Center. Your placement site will be:

Modoc Rural Health Clinic
P.O. Box 521
Cedarville, California 96104
(916) 270-4356

Your preceptor will be: Marie Holbrook, R.N.

Your housing provider will be: Mr. and Mrs. Edward Swensen
432 Mountain View Road
Cedarville, California 96104
(916) 279-9621

Copies of your application and learning objectives have been sent to your preceptor. In other words, we have made the preliminary arrangements, and now it is your responsibility to contact your PRECEPTOR and HOUSING PROVIDER by telephone within the next week. In addition to initiating a relationship, you must make arrangements for the time and place of your first meeting. Also, I suggest that if you have any questions regarding appropriate clothes/uniforms, you discuss this with your preceptor at this time. You will need your name tag in your clinical setting.

You will be meeting with me for orientation_____
_____.
During the orientation I will acquaint you with RCNP, your community, and look at helpful methods to adapt to a new setting.

In order to help you become better acquainted with your clinical placement site, we are enclosing descriptive material about the community and geographic area. Please review your Student Fact Sheet in order to refresh your memory about RCNP. Orientation is an informal time; you will meet the other students and the staff of RCNP and also have a chance to discuss all of this new information.

We are enclosing a Letter of Agreement for you to sign. Please bring this contract and all other materials you have received concerning your placement with you to orientation. If you have any questions, feel free to contact our office.

We are looking forward to seeing you soon!

Sincerely,

Jean Lawrence

Jean Lawrence, R.N., B.S.
Clinical Coordinator

JL:ls

Enclosures

LETTER OF AGREEMENT BETWEEN THE STUDENT AND THE
RURAL CLINICAL NURSE PLACEMENT CENTER

I_____. a student presently enrolled in

_____, a course at_____,
Course No.

agree to the following responsibilities during my clinical learning experience in

_____.

I shall:

A. Perform within the administrative framework of the agency.
B. Seek direct and indirect supervision from my clinical preceptor or designated qualified alternate.
C. Schedule a weekly conference with my preceptor.
D. Keep the clinical preceptor informed of my professional activities and current address and telephone number.
E. Inform clinical preceptor immediately of illness or accident.
F. Keep the Rural Clinical Nurse Placement Center (RNCPC) informed as to my current address and telephone number.
G. Contact RCNP Center staff by telephone or direct personal contact when problems arise in the clinical placement setting or community.
H. Maintain my own professional liability insurance or provide documentation of the coverage provided by my nursing program.
I. Maintain automobile liability insurance with coverage of at least $10,000 property damage.
J. Assume responsibility for any personal medical costs incurred during this clinical placement.
K. Be responsibile for travel, living expenses, and other expenses incurred as part of this clinical experience.
L. Participate in the evaluation processes requested by the Rural Clinical Nurse Placement Center.

_____
Signature

_____
Address

_____
Date

I, the above named student's instructor, have read and support this agreeement. This student is to receive_____units of academic credit for successful completion of his/her learning objectives and compliance with the terms of this agreement.

_____
Signature

_____
Date

The Rural Clinical Nurse Placement Center agrees to:

A. Select the clinical site that, based on currect information, will enable you to meet your learning objectives.
B. Orient you to the Rural Clinical Nurse Placement Center and provide a beginning orientation to the community and clinical site.
C. Assist you and your clinical preceptor in achieving your learning objectives specific to the clinical experience and the Center's objectives.
D. Make regular and requested visits to your placement site to confer with you and your preceptor.
E. Be available by telephone.
F. Arrange housing for you (unless otherwise agreed).
G. Obtain your evaluation of the Center, clinical site, and the clinical preceptor when you complete your experience.

_____

RCNP Center Director Date

I, _____, a student participating in the Rural Clinical Nurse Placement Center, grant permission to the staff of this program to:

A. Contact my nursing program if, in the RCNP Center Staff's judgement, I am not fulfilling the learning objectives of the course in which I am enrolled; or there are behavioral/social problems that are impeding my accomplishing these learning objectives. This contact would be made only after a personal conference between RCNP Center staff and me. (If applicable)

B. Obtain a copy of my performance evaluation as prepared by my clinical preceptor and myself.

C. Provide anonymous printed data obtained from the evaluations prepared by the clinical preceptor and the faculty instructor of my learning experiences to appropriate parties, i.e., educational institutions and clinical agencies in collaboration with the Center and other educational review bodies as they request this.

_____

Signature

_____

Date

_____

City Where Signed

_____

Name of Nursing Program

3/84

Appendix 14

Housing requests, Community Information Sheet,
and newspaper ads (Samples)

California State University, Chico
Chico, California 95929-0301

Rural Clinical Nurse Placement Center
(916) 895-5797

Senior Citizens Club
815 Main Street
Yreka, California 96097

Dear Members:

Greetings from all of us on the staff of the Rural Clinical Nurse Placement Center.

As Clinical Coordinator, I am writing to ask you for assistance in our continuing effort to locate housing for RCNP nursing students.

If you are familiar with the Center, you are probably aware that the one continuing problem in which community help is needed is for living accommodations. Unfortunately, there is no money available to assist students with the expenses this experience entails: room, board, gasoline, etc. The student has to pay for this himself/herself. We welcome your ideas as to places in your community where students can live.

If you are not familiar with RCNP, let me share the following information with you. The purpose of RCNP is to introduce senior level nursing students or those who have just graduated from Baccalaureate and Associate Degree Nursing Programs throughout California to the professional and personal opportunities of working in a rural area. RCNP covers the 12 northeastern counties of California. The expectation is that if this is a positive experience, some students will return to work in rural areas after graduation. This will assist many communities who experience a shortage of working registered nurses. RCNP is housed on the campus of California State University, in Chico. We are supported by the State of California, our administrative body being the California University and College System. Students are placed for a period of six to eight weeks in a rural clinical facility. This clinical experience is available throughout the year. The students receive college credit for their work.

Do you know of someone who has an unused bedroom and would be interested in making it available to a nursing student? A room with kitchen privileges would be ideal as living with a family helps to introduce the student into the life and activities of the community. Please contact the RCNP office if you have any information about housing, or if you want further information on the Center. Please feel free to call us collect. We greatly appreciate any assistance you can offer us! A slide/tape presentation is available if your organization is interested.

Enclosed are: 1) RCNP brochure; 2) a map of the area in which the students are placed by RCNP; 3) Housing Provider Questionnaires which you can have interested persons fill out and return to us - feel free to duplicate them if necessary; and 4) Community Fact Sheets.

I am hoping to hear from you soon.

Very sincerely,

Jean Lawrence

Jean Lawrence, R.N., B.S.
Clinical Coordinator

JL:pt
Enclosures

California State University, Chico
Chico, California 95929-0301

Rural Clinical Nurse Placement Center
(916) 895-5797

Mr. and Mrs. Edward Swensen
432 Mountain View Road
Cedarville, California 96104

Dear Mr. and Mrs. Swensen:

Thank you so much for indicating a willingness to either house a RCNP participant or help us find someone in the community who can!

I have enclosed a brochure, community fact sheet, and an overview of RCNP which should provide you with general information regarding our Center. I have also included 2 housing provider questionnaires. These questionnaires are helpful to us in matching the participant and housing provider. We try to make the housing experience as rewarding as possible for both the provider and the participant.

Your interest and assistance are greatly appreciated! I am looking forward to hearing from you soon.

Warmly,

Jean Lawrence

Jean Lawrence, R.N., B.S.
Clinical Coordinator

JL:pt

Enclosures

Rural Clinical Nurse Placement Center

INFORMATION SHEET FOR COMMUNITY PEOPLE

What is RCNP?

The Rural Clinical Nurse Placement Center is housed at CSU, Chico. The purpose of RCNP is to introduce nursing students enrolled in programs throughout California to the professional and personal opportunities of working in a rural area. It is anticipated that if this is a positive experience, some students will return to work in a rural area after graduation. This will assist many communities who experience a shortage of working registered nurses.

Who is involved?

Senior level nursing students from Baccalaureate and Associate Degree programs, Master's students, and those just graduating.

Where are student placements located?

Clinical experiences are located in the mountain and valley communities of Northeastern California. The 12 counties included are Butte, Colusa, Glenn, Lassen, Modoc, Plumas, Shasta, Siskiyou, Sutter, Tehama, Trinity, and Yuba.

When are the students involved?

Students are involved on a year-round basis. Placements are for 6-8 weeks with a minimum of three days per week.

What kinds of learning experiences are available?

Students are placed in acute hospitals, community health settings, convalescent/extended care facilities, and health clinics. Students are supervised by either a registered nurse, public health nurse, family nurse, practitioner, physician's assistant or physician from the local health care agency.

What are the student's costs?

The student has to pay for his/her living arrangements, gasoline, and recreation expenses.

*** * * COMMUNITY SUPPORT IS NEEDED!!! * * ***

Housing is the one continuing problem in which community support is needed. Students pay for their own arrangements. This often means supporting two residences, i.e., their permanent school residence and their rural 6-8 week residence. There is no money available to assist the students with these expenses. RCNP staff are depending on the local communities to identify economical housing arrangements. A room with kitchen privileges would be ideal as this helps introduce the student to people in the community. Perhaps you or someone you know have an unused bedroom to rent to a female or male student nurse. If you can provide housing, please contact RCNP's office collect in Chico at (916) 895-5797.

What is my community's reward?

These students are potential employees of your local hospital, physician's office, or health department. They are potential homeowners, taxpayers, and service consumers. By participating in RCNP you are contributing in a special way to his/her education. The student will gain an expanded view of nursing. You may also be helping to recruit a registered nurse for your community.

Your assistance in this registered nurse educational and recruitment program is greatly appreciated.

For more information contact:
Rural Clinical Nurse Placement Center
Administration 301
California State University, Chico
Chico, California 95929
(916) 895-5797/895-5798

9-76-111

RURAL NURSE
PLACEMENT HOME
NEEDED HERE

The Rural Clinical Nurse Placement Project (RCNP) is looking for people who would be willing to rent a room with kitchen priviliges to a nursing student for a period of six to eight weeks. The purpose of the program is to introduce senior level nursing students to the opportunities of working in a rural area. This is a chance for the community to recruit an R.N.

If you have a spare room that you would be willing to rent to a student nurse for a short time, contact the RCNP office at Sutter Hall, California State University, Chico, Chico, CA. 95929 or phone 895-5797.

This summer an R.N. student who is working on her B.S. degree at Holy Names College, will be in Orland from June 2 through July 16. Pat Burke, Family Nurse Practitioner at the Orland Family Health Center will be serving as her preceptor. One of the student's major goals is to find out what it is like to live and work in a rural area.

Appendix 15

Participant Housing Questionnaire (Sample)

A copy of this questionnaire will be sent to your housing provider.

Name _____

RCNP PARTICIPANT HOUSING QUESTIONNAIRE

I have housing available. ____Yes ____No.

I need housing for myself only. ____Yes ____No. If "no," describe your needs:

Would it bother you to share a room with another student involved in RCNP? ____Yes ____No.

General Information

RCNP works with many different housing providers and participants. We try to match the participants with an appropriate living situation. Housing providers come from various urban/rural, religious, and cultural backgrounds. RCNP would like this living situation to be satisfying for you. If there is information not asked below that would be important for us to know in locating suitable housing, please indicate in the space provided at the bottom of the page.

Do you smoke? ____Yes ____No.

Would it bother you if the housing provider smoked? ____Yes ____No.

Do you drink alcoholic beverages? ____Yes ____No.

Would it bother you to live with a person/persons who serve alcoholic beverages? ____Yes ____No.

Do you have very specific dietary requirements and cooking regimes? ____Yes ____No.
If "yes," describe your needs:

Do you enjoy socializing with other people after work in the evenings? ____Yes ____No.

Do you enjoy inviting friends over in the evening? ____Yes ____No.

Would you prefer to live with a family? ____Yes ____No.

Would you like to be included in family activities? ____Yes ____No.

If possible would you prefer to live alone? ____Yes ____No.

Do you have a strong religious preference? ____Yes ____No.
Name of denomination:

Do you have any special health needs that your housing provider should be aware of? ____Yes ____No. If "yes," describe:

Is there any other information you would like to share with us that would be helpful in locating appropriate housing for you? (Please write here)

(OTHER SIDE)

Appendix 16

Housing Provider Questionnaire (Sample)

Date_____

Name_____

Address_____

Telephone_____

HOUSING PROVIDER QUESTIONNAIRE

Type of housing available: Cost-Fee/Month_____

1. Room with kitchen privileges.
2. Room and board.
3. Room only (no board or kitchen privileges).
4. "House sitting" (live in home while owners are away).
5. Trailer.

How many students can you provide housing for at one time? _____

Can two students share a room? ____Yes ____No. If "Yes" what would be fee/month._____

Twin bed ____ Double bed ____ Private bath ____ Share bath ____.

Does student need to bring own linen? ____Yes ____No. Towels? ____Yes ____No. Kitchen utensils? ____Yes ____No.

Type of household heating/cooling arrangement.

General Information

With the above questions we have tried to gather information that will be useful in describing the housing you can provide. RCNP also tries to match the student with the living situation. We work with many different housing providers and students. Students come from various urban/rural, religious, and cultural backgrounds.

RCNP would like this living situation to be satisfying for you. If there is other information not asked below that would be important for us to know in matching your housing situation with a student, please indicate in the space provided at the bottom of the page.

Do you smoke? ____Yes ____No.

Would it bother you if the student smoked? ____Yes ____No.

Do you occasionally drink alcoholic beverages? ____Yes ____No.

Would it bother you if the student drank alcoholic beverages occasionally? ____Yes ____No.

Do you consider your home environment quiet? ____Yes ____No.

Would it bother you if the student had friends over in the evening? ____Yes ____No.

Will the student be included as a part of your family unit or strictly as a renter?

Does it matter if the student is male or female? ____Yes ____No. If "Yes" indicate preference.

Do you have a strong religious preference? ____Yes ____No. If "Yes" indicate preference.

_____

Do you have children living at home? ____Yes ____No. If so, what ages? _____

Do you have pets? ____Yes ____No.

Other information:

For your convenience return address is on reverse side, no postage required.

PLEASE FOLD, FASTEN & RETURN

Appendix 17

Letters of confirmation to landlord/participant

California State University, Chico
Chico, California 95929-0301

Rural Clinical Nurse Placement Center
(916) 895-5797

Ms. Francis Jones
280 W. 5th Street
Chester, California 96020

Dear Ms. Jones:

Thank you so much for offering to provide housing for Mary Smith! A good housing situation is so important for a student who is in a new area and undergoing so many new experiences. I hope you will find it enjoyable having Mary in your home!

I am enclosing a housing provider questionnaire for you to return to us, and also some additional information on the Rural Clinical Nurse Placement Center. Please feel free to call collect with any questions you may have regarding the Center.

Rather than telling you about Mary, I am enclosing a copy of her housing questionnaire. Perhaps this will help you begin to get acquainted with her. I have indicated on the application the dates and clinical site for Mary's placement. If any situation arises during the placement which you feel we could be helpful in resolving, please do not hesitate to call me or the Director, Sandra Siddall, collect.

Again, your offer is greatly appreciated! I will be in touch with you soon.

Sincerely,

Jean Lawrence

Jean Lawrence, R.N., B.S.
Clinical Coordinator

JL:pt
Enclosures

California State University, Chico
Chico, California 95929-0301

Rural Clinical Nurse Placement Center
(916) 895-5797

Ms. Mary Smith
Reiber Hall
University of California, Los Angeles
Westwood, California 90024

Re: Housing arrangements

Dear Mary:

I hope all is going well for you! I'm sure you're eager to know what type of housing situation you will have during your placement! So, here it is - During your clinical placement you will be living with:

Ms. Francis Jones
280 W. 5th Street
Chester, California 96020
(916) 258-3951

Ms. Jones has a room with an outside entrance for you. You may share meals with the family and she will provide linens.

It is very important that you contact your housing provider by phone BEFORE you arrive. Your housing provider will be expecting you to call approximately a week before your arrival. At this time you can make plans regarding your arrival, deal with questions either of you might have, and start to develop a relationship.

I'm really looking forward to meeting you at orientation. Till then -

Warmly,

Jean Lawrence

Jean Lawrence, R.N., B.S.
Clinical Coordinator

JL:pt

Appendix 18

Format for Participant Orientation Session
and Participant Packet Checklist (Sample)

RURAL CLINICAL NURSE PLACEMENT CENTER
FORMAT FOR THE STUDENT ORIENTATION SESSION

I. Introductions

II. Slide-tape presentation and/or map

III. C.E. payment - is course needed to graduate?

IV. Discuss:

4.1 Questions regarding the community packets received by students

4.2 Incomplete student paperwork; preplacement questionnaire, malpractice documentation, letter of agreement, etc.

4.3 Initial phone contact with preceptor, housing provider.

V. Introduction to RCNP

5.1 Planning the Placement Experience with the Preceptor

a. Meet with preceptor on the first day of the placement to:

-Discuss student learning objectives, i.e., how each can be met, possible modifications, et.

-Discuss student skills list

-Develop student calendar. The student should post a calendar indicating the days he/she plans to spend in the facility so that the staff is aware of the student's schedule. This helps ensure that the preceptor or another staff member of comparable expertise is available to supervise the student.

-Discuss expectations regarding the role and learning style of the student and preceptor.

-Tour the facility, meet the staff and orient to facility policies.

-Discuss and/or plan learning experiences outside the placement facility. The student is required to spend approximately 3 days at other types of health facilities to gain a more complete overview of the health care provided in that area. Suggestions can be generated at this first meeting with the preceptor regarding appropriate agencies. Usually the RCNP staff will contact these agencies to obtain permission for student visits.

5.2 Preceptor Student Conferences

a. Plan a weekly meeting with the preceptor (approximately 30 - 60 minutes) for the purpose of:

-Assessing progress being made on learning objectives
-Identifying and managing any problems that may exist
-Planning other agency visits
-Maintaining open lines of communication

5.3 Site Visits

a. During the placement, RCNP staff will make at least one site visit to meet with the student and preceptor. This is usually a short informal meeting, the purpose being to ensure that the student's objectives are being met and discuss any problems that may exist.

5.4 Seminar

If the number of students is large enough, a seminar may be held on a day halfway through the placement. The students and RCNP staff meet together at a central location to discuss their experiences and share information about their community and placement site. The students are required to bring the first half of their journal to the seminar.

5.5 Closing Seminar

On the last day of the placement the students are required to return to Chico to meet with RCNP staff and complete evaluation forms. At this time the List of Names for Thank you Letters will also be collected.

5.6 RCNP Staff

a. RCNP staff make every attempt to be available whenever needed. It is very important that students keep the staff informed if any problems arise, or if the placement situation is unsatisfactory in any way. The staff is available by telephone at both the office and at home.

b. As mentioned, RCNP staff usually coordinate the student visits to agencies other than the placement facility.

5.7 Faculty

a. The instructor may or may not establish contact with the preceptor during the placement.

b. Most instructors wish to have the preceptor complete an evaluation of the students. The instructor may either send this evaluation to the preceptor or ask the student to bring it to the preceptor.

5.8 Rural Nursing (handout)

5.9 Expectations and the Role of the Student in the Facility

a. Expectations of community, agency, precptor

b. Stereotypes and realities of rural living (remoteness, conservatism, etc.)

c. Confidentiality

d. Assertiveness

e. Flexibility

f. Student/Staff role

g. Legal restrictions

h.

i.

5.10 Housing

a. Payment

b. Use of the telephone

5.11 Miscellaneous

a. Vacation plans

b. Chamber of Commerce

PARTICIPANT PACKET CHECKLIST

Housing Provider_____ Student's Name_____

Preceptor_____

Instructor_____

Placement Date_____

Check if sent

1. Letter confirming placement
2. Letter confirming housing
3. Agency Narrative
4. Student Required Activities
5. Student Letter of Agreement
6. Map of service area
7. Description of service area
8. Directions to placement facility
9. City Map
10. City Description
11. County Description
12. Copy of Learning Objectives

Appendix 19

Required Activities

RCNP PARTICIPANT INFORMATION

In an effort to avoid confusion and misunderstandings, I am outlining some of the important points which may need to be considered in planning your placement. Most of the following information is discussed in more detail in later correspondence.

1) Letter of Agreement. This agreement is sent to the participant with the letter confirming the placement site. It is the responsibility of the participant to sign this agreement and bring it to orientation.

2) Preplacement Communication with Preceptors and Housing Providers. Participants are responsible for contacting their preceptor and housing provider by telephone approximately a week before their arrival. This provides a chance to get acquainted and arrange last minute details.

3) Orientation. Orientation is held on the first day of the placement, usually at Jean Haberlin's house. It is usually held in the morning - the exact time is dependent on the number of participants, weather conditions in the winter, etc. Participants coming from long distances may wish to spend the night in Chico the night prior to orientation. The participant is responsible for arranging and paying for his/her own lodging. Chico has quite a few motels, including a Motel 6.

4) Site Visit. During the placement, the Clinical Coordinator will make at least one site visit to meet with the participant and preceptor. This is usually a short, informal meeting, the purpose being to ensure that the participant's objectives are being met and that the preceptor and participant are both having a satisfying experience.

5) Seminar. A seminar is held approximately halfway through the placement, if time allows. The participants and clinical coordinator meet together at a central location to discuss their experiences and share information about their community and placement site. (If the number of participants is large, the group may be split into 2 or 3 seminar groups.)

6) Closing Seminar. On the last day of the placement, the participants are required to return to the RCNP Office at CSU, Chico to meet with the clinical coordinator and complete evaluation forms.

7) For those of you receiving academic credit from CSU, Chico, the grade for the course will be determined in the following manner:

75% - written clinical evaluation
completed by preceptor

25% - quality of journal.

RESPONSIBILITIES OF RCNP PARTICIPANTS

Complete all necessary preplacement paperwork and mail it to RCNP at least 7 weeks prior to requested placement date. (Please notify RCNP if it is not possible to meet the deadline, exceptions will be considered.)

- Application
- Learning Objectives
- Participant Statement
- Preplacement Questionnaire
- Housing Questionnaire
- Letter of Agreement (see No. 1 on attached information sheets)

Communicate with preceptor and housing provider by phone 1-2 weeks prior to placement. (See No. 2 on attached information sheet.)

Participate in: 1) orientation at CSU, Chico, on first day of placement, 2) 1-2 seminars during placement, 3) 1 site visit during placement, 4) closure session at CSU, Chico on last day of placement. (See No. 3, 4, 5 and 6 on attached information sheet.)

Perform within the administrative framework on the agency.

Seekdirect and indirect supervision from the clinical preceptor or designated qualified alternate.

Schedule a weekly conference with your preceptor.

Inform clinical preceptor immediately in case of illness or accident during placement.

Keep Rural Clinical Nurse Placement Center (RCNP) informed as to current address and telephone number.

Contact RCNP staff by telephone when problems arise in the clinical placement setting or community.

Maintain professional liability insurance or provide documentation of the coverage provided by your nursing program.

Maintain automobile liability insurance with coverage of at least $10,000 property damage.

Assume responsibility for any personal medical costs incurred during this clinical placement.

Be responsible for travel, living expenses, and other expenses incurred as part of this clinical experience.

Visit local Chamber of Commerce to obtain information about area of placement.

Complete learning objectives and course objectives.

Complete postplacement paperwork at RCNP office during closure.

- Postplacement Questionnaire
- Projected Employment Plans
- Evaluation of Placement Experience
- Evaluation of RCNP Program
- Evaluation of Housing Situation
- Evaluation of Preceptor
- List of People Who Made a Significant Contribution to Your Placement Experience

Complete longitudinal study forms once a year during the first five years following graduation.

Maintain daily journal including information on both objective and subjective levels.

4/84

FACULTY RESPONSIBILITIES

Inform students regarding RCNP

1) Summary Packet for Student/Faculty Review
2) Visit from RCNP staff and/or telephone contact.

Select educationally prepared students for placement experience

1) Fill out and return Instructor Statement.

Assist the student in the preparation of appropriate learning objectives to be submitted to RCNP approximately 7 weeks prior to requested placement date.

Determine the units of credit to be granted the student who successfully completes this clinical option.

Provide the student with specific information regarding the requirements the student must fulfill for completion of this preceptorship course.

Send RCNP a copy of the outline of the course under which the student will be participating in the preceptorship.

Provide evaluation form for student and clinical preceptor to complete at the conclusion of the student's experience.

Submit an evaluation of the student's learning experience to the RCNP center upon completion of the experience.

Be available by telephone to collaborate with the health agency clinical preceptor and RCNP staff.

RESPONSIBILITIES OF RCNP STAFF

Identify health facilities that can provide positive learning experiences for students.

Identify, with the assistance of appropriate administrative personnel, qualified preceptors.

Orient faculty to the program, its goals and methodology. Assist faculty in the implementation of RCNP within their curriculum. Provide faculty with information regarding the progress of his/her student's placement experience.

Determine an appropriate clinical placement site for the student.

Locate economical housing for students. Students will not be placed in a community unless adequate housing is identified.

Provide the health agency and housing provider with information about the student prior to his/her arrival.

Provide the educational institution with information about the health agency and clinical preceptor prior to the placement of the student.

Orient clinical preceptors and housing providers to the placement program and their role in RCNP.

Orient students to the program, the community, and the assigned agency as well as their responsibilities as participants in this placement program.

Obtain documentation demonstrating that each student is covered by professional liability insurance.

Be available for consultation by telephone or in person to students, faculty, clinical preceptors and housing providers. Facilitate communication between the preceptor, student and faculty member.

Make regular and requested visits to clinical placement sites where students are assigned.

Conduct student seminars every 3-4 weeks.

Obtain a written and/or verbal evaluation of the learning experience from the preceptor, student and faculty member involved.

PRECEPTOR RESPONSIBILITIES

Become informed as to the goals of RCNP, (review written material and discuss placement experience with RCNP staff.

Become informed as to the student's learning objectives. These will be sent to the preceptor prior to the student's placement.

Review these learning objectives with the student on the first day of her placement.

Determine, with the student, the clinical experiences that will help the student meet these learning objectives.

Develop a written plan with the student that will provide for the necessary supervision and consultation. The student and preceptor must be "on duty" at the same time unless prior arrangements are made for an equally qualified health professional to assume responsibility for supervision and/or consultation.

Decide upon a weekly conference time (30 - 60 minutes). The purpose of the conference is to review the student's progress in achieving the learning objectives; identify and work on solving any problems; plan for special learning experiences; and keep communication open.

Orient the student to the clinical facility - personnel, policies, procedures and physical plan.

Assist the student to become acquainted with the people and activities of the community.

Maintain verbal and/or written communication with the student's instructor as mutually agreed upon.

Participate in the site visits made by RCNP staff.

Inform RCNP if any problems arise during the student's placement.

Prepare a written evaluation of the student's progress in meeting his/her learning objectives. Also evaluate the student's attitude and the manner in which she/he demonstrates a professional commitment to patients, staff, preceptor and agency. The specific form will be provided by the educational institution. Send a copy of the completed form to RCNP.

Evaluate the total preceptor/student experience as requested by RCNP.

Appendix 20

Newsletter (Sample)

Regional and Continuing Education
California State University, Chico
Chico, California 95929
(916) 895-5797/895-5798

Rural Clinical Nurse Placement

RCNP UPDATE

From the Project Director

We are pleased to be able to tell our readers that RCNP has been approved for continuation through the 1978-1979 budget year. I look forward to seeing the RCNP Model-package being completed and one California campus adopting it by Spring of '79. By the end of our fiscal year of '79 we should have begun work with one out-of-state campus in adopting this Rural Placement Model as well.

I would like to introduce our newest staff members:

Sylvia Novak is RCNP's Assistant Project Director. She is a Master's level nurse who comes to us from Chico after a state wide search for an Assistant Project Director. Sylvia has been employed at Chico Community Memorial Hospital for the last year and a half. She functioned part-time as a staff/charge nurse and part-time as an infection control nurse. Sylvia is a generalist in nursing and, therefore, brings to us a variety of experience and knowledge. She has a warm smile and brown eyes that would warm the coldest of hearts. She and Sharon will be responsible for the enormous amount of work in this office that deals with the students and their placements. Sylvia is married and has a family of 4 children.

Jean Haberlin is our part-time clerk-typist. She is a dynamic, reliable, efficient nursing student in the CSU-Chico nursing program. Due to her academic load she has a limited schedule with us, but she adds much to the working efficiency of this office when she is here.

I hope that in the near future, you will all get an opportunity to view the 24" documentary film on RCNP. It was produced by Fred G. Thorne and Kayla Garen, top rate television professionals from the Hollywood area. The film identifies how RCNP works and what we are trying to accomplish. The film was shot on location in the Weaverville and Greenville areas, beautiful aesthetic Northeastern California locales. Also some of the footage was shot on our lovely CSU-Chico campus. All total, the videotape explains academic concepts and shows in beautiful vivid color, with magnificant mountain, lake and evergreen scenes, how RCNP does its job in helping to address the problem of Registered Nurse maldistribution.

From the Assistant Project Director

As the new Assistant Project Director for RCNP, one of my priorities was to visit agencies and preceptors who offer rural nursing experience to our RCNP students.

The prospect of travelling throughout Northeastern California was exciting, as many areas were new to me, personally. Without turning this article into a travelogue, let me share with you some "tidbits" of my experience.

There's a rural health clinic in the small town of Westwood. This clinic is government-grant supported, manned by young, enthusiastic health care providers. Westwood, an old, former lumbermill town, has quaint, wood-frame houses that all look alike, giving the town a unique and storybook flavor. Thick forests surround this town of 300, located east of Lake Almanor on the road to Susanville. Westwood suddenly came alive again after years of abandonment when the mill shut down. Poor families, many on welfare, heard about houses that were in need of repair but could be had for a "song". They came in great numbers; Westwood was reborn. The health needs of this population are well known to those of us in health care. Not all small towns are lucky enough to have a health clinic.

Cedarville, in Surprise Valley - a little town (pop. 600) with old, victorian houses - rests among large cattle ranches in Northeastern California. People living there are employed by services in the town, or they work for surrounding ranches and lumbermills. I stepped into the 26-bed hospital and soon met the Director of Nursing, who was acting that day - as she had for the past sixteen days straight - as the charge nurse for the hospital. I asked about staffing needs; she replied, "I'm desperate!"

Close to Cedarville is Alturas, town of 3,000 people, that boasts, "where the west still lives". The health services include an acute and convalescent hospital, and two doctors, plus Modoc County's state contracted Health Department, composed of Don Prine, PHN, and a sanitarian as its only professional members. Visiting Don was certainly educational! He works out of one large room that functions as an office and an examination/ treatment room. The usual clinics take place there, but definitely within limits! He told me they needed someone to work up in a remote area 75 miles north. Apparently there was no one in the area who could even identify and refer, let alone treat the problems of the people, many of whom are native Americans.

In Redding, things seemed typical of a larger city. (After all, 45,000 seems huge in comparison!) The ICU at Mercy Hospital looked as sophisticated as most, and our student placed there pinpointed the justification for calling her experience different and more rural than, say Long Beach. "True, we have all the modern equipment, but the patients are different! We get logging accidents, tourists, and people from remote, rural areas." (One patient had just come in who arrived by ambulance from Alturas!) "Besides", she added, "all the people here are different; more friendly and helpful, make you feel more welcome than in large cities. And where else can you drive - in just a few minutes - to large, blue lakes surrounded by green forests, and find it uncrowded and peaceful?"

I headed west from Redding and would my way through those green forests and past those blue lakes (they are uncrowded!) to Weaverville. Another male PHN, David Humes, is based here but spends much of his time visiting his patients in the surrounding countryside. Dave throws a sleeping bag and other camping gear into his VW and treks off to little settlements with names like Whiskeytown, Hayfork and Peanut, where he holds prearranged clinics. He covers a wide range of health needs and health teaching, as he circles through Trinity County. For many, he is the only contact with a health care person they ever have.

Farther south, in the flat rice fields of Sutter County, is a large population of Punjabe from East India. They seldom leave the isolated world of the ranches where they live and work. But the night clinic of Yuba City is known to them - there are Punjabe and Spanish professionals on the staff. The clinic is supported by the Northern Sacramento Valley Rural Health Project and serves migrant and low income patients. Our student spent some time talking with the staff and learned about the health problems unique to these people. Of primary importance is preventive care through teaching. Their problems include hypertension, obesity, dental caries and diabetes - all of which are related to nutrition and could be reduced if a nurse with knowledge and ability to incorporate a plan into their cultural habits and beliefs were to get involved.

Health Clinics, Acute Care, Community Health . . . sure! But that's not all . . .

Susanville, a larger town of 7,000 lies in a small, high valley overlooked by Lassen Community College. A pleasant surprise came to me as I visited the Susanville Convalescent Hospital. What's surprising about a convalescent hospital, you ask? Well, this one just happens to include the only inpatient facility in Northern California for the Developmentally Disabled. About 50 patients of all ages are housed here and an active, complete program utilizing sensory motor training activities of daily living occupies several hours each day. Here is an opportunity for a student focusing on mental health and interested in working with the developmentally disabled to realize in-depth clinical experience - a surprise in a rural area!

A similar situation exists in Yuba City; a larger city compared to our really small towns, but still very much a part of the total

rural scene. Set in the middle of large orchards is the Mental Health Clinic. A complete program of inpatient, outpatient, day care treatment, individual and group counseling takes place here, utilizing Psychiatrists, Psychologists, Mental Health Social Workers, Physician's Assistants, Registered Nurses, Occupational Therapists and students. And the clincher that sets this clinic high on our list is the fact that it boasts accreditation by JCAH, something rural mental health clinics seldom achieve.

Willows, only 4,000 population with a small general hospital, has an inpatient psychiatric wing, and includes a large outpatient department with a psychiatrist, a psychologist, and various mental health workers. Who says a student can't find total mental health services with quality preceptors unless they go to a large, urban center!

I came home tired but excited about our work. What gorgeous country I saw! What exciting and unique rural nursing experiences await the students!

* * * * * * * * * * *

We ask students to tell us who was significantly helpful to them, so that we could thank them with a note of acknowledgment.

We want to share this unusual answer with you.

WHO WAS SIGNIFICANT

Who was significant and helpful to my experience?

It was Curly, age 68, who lives in a van in the local campground. He summers in Etna where he watches over his mining claims and winters in Parker, Arizona. He has one kidney, smokes three packs a day, is full of piss and vinegar to the point of being almost repulsive, and underneath it all is just a lonely old man. He is ill, afraid he'll die soon - afraid only that his dog, Rags, will be left homeless. He asked me to promise to take Rags if he, Curly, died before I left town.

It was Becky, the RN, who came with RCNP to Scott Valley three years earlier and stayed. Today she is employed only part-time as an ambulance attendant. She is joyous to be alive, always laughing, and out in the country where she wants to be. She taught me how to feed the bulls at Hammond's farm.

It was Florence, the regal Indian lady. Ninety plus years old, she would complain playfully that I should bring her new ears because her hearing was bad. Why was I bothering with her blood pressure? It was her ears that were bad!

It was the Earth Mother patient who just didn't care if I did a bimanual pelvic exam on her even though I was the third person to do it. It was worth all the idle hours at our clinic to see the look of amazement on her face when she used a hand mirror to visualize her own cervix for the first time.

It was Barnie, Florence's son. He was 52, looked 72, and had a history of ETOH abuse. He taught me not to jump to palpate, or poke and push a liver just because I wanted something exciting to finally do that day.

It was Doug, the former Siskiyou County Cowboy Champion, who spent two hours speaking with me about farming, ranching, and the plight of the rancher and farmer in today's world, what with the big agricultural corporations taking over, if it weren't the taxes killing you on the other side.

It was Larry, who left Medical School in his third year almost 15 years earlier and today worked as a Teacher's Aide for developmentally disabled kids. He had lost a son to terminal illness and decided a long time ago that he wanted his life to be meaningful rather than just profitable.

It was Dr. Joe, the dentist, who spent one-and-a-half hours one afternoon talking theology with me. It was Gayle, the merchant seaman, who spent hours learning and playing backgammon with me. It was my preceptor's intelligent precocious two-and-a-half year old daughter, Belinda. It was all the patients in our clinic who allowed me to share in their health care. It was all the sincere, honest, open, spiritual people I met in six weeks. It was everyone, altogether. Because everyone was pleasant or helpful or open or instructive.

It was.....

It was all the people you never meet,
because it seems that you never meet anyone,
when you stay in cities.

Written by Jan Presser
Student Nurse from
CSU, Sacramento

* * * * * * * * * * * * * * *

ATTENTION NURSING FACULTY

RCNP staff has just completed a new 20 minute slide/cassette presentation especially for students. Through the camera's eye, students tour the facilities and the kinds of clinical placements available, along with scenes of housing and seminar sites. Highlighting the tour are gorgeous examples of Northeastern California's geographical and seasonal displays. Plan to show it to your students!

Appendix 21

PRECEPTOR PACKET CHECKLIST

1. Preceptor letter
2. Copy of participant's application, learning objectives and proof of insurance
3. Preceptor fact sheet
4. Suggested guidelines for preceptors
5. Preceptor Handbook
6. Business cards
7. Professional vitae - if not already on file
8. Student statement
9. Agency information sheet to new agency

Appendix 22

Form Letters

Some form letters that are used infrequently have not been reproduced for this manual.

Participant Letters

Response to letter of inquiry from participants
Enclosures: Student fact sheet (Appendix 2)
RCO Brochure (Appendix 1)
Application (Appendix 12)
Newsletter (if available) (Appendix 20)

Follow-up letter (if no response from participant)

Receipt of application and objectives
Enclosures: Participant housing questionnaire (Appendix 15)

Participant placement letter (confirms preceptor and housing, Appendices 10 and 17)
Enclosures: See Participant Packet Checklist (Appendix 18)

Letter confirming housing only (Appendix 17)

Placement Facility/Preceptor Letters

Letter to prospective agency/preceptor
Enclosures: Blank Agency Information Sheet, Community Information Sheet, Preceptor Fact Sheet (Appendices 4, 14, and 8)

Letter requesting placement facility information
Enclosures: Blank Agency Information Sheet (Appendix 4)

Letter requesting update of present information
Enclosures: Copy of current Agency Narrative (Appendix 4)

Letter to new preceptor regarding participant placement
Enclosures: See Preceptor Packet Checklist (Appendix 21)

Letter to placement facility with letter of agreement requiring signature (Appendix 7)

Letter sending completed letter of agreement (Appendix 7)

Thank-you letter to preceptor, (Appendix 11) asking for participant evaluations
Enclosures: Evaluation form (Appendix 24)

Letter of thanks to continuity of care agencies

Letter of thanks to helpful persons

Housing Provider Letters

Letter welcoming organizations helping with housing
Enclosures: Community Information Sheet (Appendix 14)

Welcome to new housing provider

Enclosures: Community Information Sheet and housing questionnaire (Appendices 14 and 16)

Letter to provider confirming housing arranged by telephone

Thank you for housing

Enclosures: Housing Provider Questionnaire (Appendix 16)

Letter to recruit housing

Enclosures: Community Information Sheets, Housing Provider Questionnaires, and a map (Appendices 14 and 16)

Appendix 23

Post-Placement Debriefing Questions

BRIEFING QUESTIONS

At the seminars, you have all had a chance to share with us your experiences in your placement site; experiences that involved your preceptor, your housing, some continuity of care impressions, and the community as a whole.

Thinking about the total experience, re-state in summary your final impressions now that it's over. Include your reactions to the following questions in your response:

1. Why was it, or was it not, a valuable experience to have at this time in your educational program? In what ways do you predict this preceptorhip experience will influence your future plans for job selection? Continued academic growth?

2. Compare your understanding of how health care is provided in a rural area before participation in RCO and after participation.

3. Do you recommend this as a learning experience for another student? What are your reasons?

4. Preceptor relationship - What were the most helpful factors of your relationship with your preceptor? What were the least helpful factors of your relationship with your preceptor?

5. Were your community experiences useful? Did you become better acquainted with the community. What other experiences would you have liked? Do you recommend your housing situation for another student? Discuss.

6. RCO staff relationship - What were the most helpful/least helpful factors of your relationship with RCO staff? Roles, site visits, seminars, and communication? What recommendations do you have for improving the RCO?

7. What do you feel was unique about this clinical placement/community living experience?

Appendix 24

Form for Preceptor's Evaluation of Participant

Participant's Name_____

Nursing Program_____

Placement Dates_____

RURAL CLINICAL NURSE PLACEMENT CENTER

Evaluation For Clinical Preceptor/Clinical Agency

1. What are your observations about:

   Participant performance

   Preceptor/agency satisfaction

2. Most positive feature of the experience:

3. Least positive feature of the experience:

4. Recommendations to improve the participant placement experience:

5. If you had a job opening for which this person were qualified, would you employ him/her after he/she graduated? _____Yes _____No. Why?

6. Additional comments:

Name of person writing evaluation_____

Placement facility_____

Date evaluation filled out_____